2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 05, 2007
Secretary of State

DOCUMENT# L05000086109

Entity Name: RAND ASSOCIATES, L.L.C.

Current Principal Place of Business:

14000 NW 20 STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

14000 NW 20 STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 20-5052763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RAND, DAVID
14000 NW 20 STREET
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: RAND, DAVID
Address: 14000 NW 20 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR ( ) Delete
Name: RAND, MERRILL
Address: 14000 NW 20 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR ( ) Delete
Name: RAND, LINDA
Address: 11021 RED HAWK ST.
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RAND DAVID MGR 07/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date