

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000086336

**FILED**  
**Apr 29, 2007**  
**Secretary of State**

**Entity Name:** L. ANDERSON PROPERTIES L.L.C.

**Current Principal Place of Business:**

1712 NW 2ND STREET  
POMPANO BEACH, FL 330692528

**New Principal Place of Business:**

5175 CHARDONNAY DRIVE  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

1712 NW 2ND STREET  
POMPANO BEACH, FL 330692528

**New Mailing Address:**

P.O. BOX 669141  
POMPANO, FL 33066

**FEI Number:** 20-3411326

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

NINOS, CHRISTOPHER M CPA  
1600 S. DIXIE HIGHWAY, STE. 503  
BOCA RATON, FL 334327454 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: MGRM ( ) Delete  
Name: PRIESTER, LISA B  
Address: 1712 NW 2ND STREET  
City-St-Zip: POMPANO BEACH, FL 330692528

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PRIESTER, LISA B  
Address: 5175 CHARDONNAY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33067

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:** LISA PRIESTER

MS.

04/29/2007

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