

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000116596

Entity Name: 3900, LLC

FILED  
Jan 19, 2009  
Secretary of State

## Current Principal Place of Business:

800 NE 6TH STREET  
BOCA RATON, FL 33431 US

## New Principal Place of Business:

3900 NE 6TH DRIVE  
BOCA RATON, FL 33431 US

## Current Mailing Address:

800 NE 6TH STREET  
BOCA RATON, FL 33431 US

## New Mailing Address:

3900 NE 6TH DRIVE  
BOCA RATON, FL 33431 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREENFIELD, STEVEN B ESQ  
7000 W. PALMETTO PARK RD.  
#402  
BOCA RATON, FL 33433 US

## Name and Address of New Registered Agent:

BERGENTY, WILLIAM F  
3900 NE 6TH DRIVE  
BOCA RATON, FL 33433 US

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: WILLIAM F. BERGENTY

01/19/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BERGENTY, WILLIAM F  
Address: 39 JOHNSON AVE  
City-St-Zip: PLAINVILLE, CT 06062 US

Title: MGRM ( ) Delete  
Name: BERGENTY, CARLA Z  
Address: 39 JOHNSON AVE  
City-St-Zip: PLAINVILLE, CT 06062 US

## ADDITIONS/CHANGES:

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: WILLIAM F. BERGENTY

OWNE

01/19/2009

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