2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2007
Secretary of State

DOCUMENT# L05000121032

Entity Name: 949 CLINT MOORE, LLC

Current Principal Place of Business:

949 CLINT MOORE ROAD
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

949 CLINT MOORE ROAD
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 20-4115325 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LICHTMAN, JONATHAN J P.A.
120 E. PALMETTO PARK RD., SUITE 100
BOCA RATON, FL 33432 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:	VAUGHN, ROBERT E JR.	
Address:	949 CLINT MOORE ROAD	
City-St-Zip:	BOCA RATON, FL 33431	
Title:	MGR	( ) Delete
Name:	ACEVEDO, RODOLFO C	
Address:	949 CLINT MOORE ROAD	
City-St-Zip:	BOCA RATON, FL 33431	
Title:	MGR	( ) Delete
Name:	MYOTT, STEVEN E	
Address:	949 CLINT MOORE ROAD	
City-St-Zip:	BOCA RATON, FL 33431	
Title:	MGR	( ) Delete
Name:	WILLIAMS, JAMES R	
Address:	949 CLINT MOORE ROAD	
City-St-Zip:	BOCA RATON, FL 33431	
Title:	MGRM	( ) Delete
Name:	TRUJILLO, CRESENCIO M JR.	
Address:	949 CLINT MOORE ROAD	
City-St-Zip:	BOCA RATON, FL 33431	
Title:	MGR	( ) Delete
Name:	JONES, RICHARD C	
Address:	949 CLINT MOORE ROAD	
City-St-Zip:	BOCA RATON, FL 33431	

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:	
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 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: C.M. TRUJILLO JR. MGRM 04/19/2007

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