

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122109

FILED
Feb 19, 2008
Secretary of State

Entity Name: ROTUNDA DEVELOPMENT GROUP, LLC

Current Principal Place of Business:

11247 SEAGRASS CIRCLE
BOCA RATON, FL 33498

New Principal Place of Business:

2295 NW CORPORATE BLVD.
SUITE 110
BOCA RATON, FL 33134

Current Mailing Address:

11247 SEAGRASS CIRCLE
BOCA RATON, FL 33498

New Mailing Address:

2295 NW CORPORATE BLVD.
SUITE 110
BOCA RATON, FL 33134

FEI Number: 75-3220966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, DAVID B
11247 SEAGRASS CIRCLE
BOCA RATON, FL 33498 US

Name and Address of New Registered Agent:

COHEN, DAVID B
2295 NW CORPORATE BLVD
SUITE 110
BOCA RATON, FL 33134 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:

02/19/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COHEN, DAVID B
Address: 11247 SEAGRASS CIRCLE
City-St-Zip: BOCA RATON, FL 33498

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COHEN, DAVID B
Address: 2295 NW CORPORATE BLVD, SUITE 110
City-St-Zip: BOCA RATON, FL 33134 US

Title: MGRM () Change (X) Addition
Name: RAFF, CAROLYN P
Address: 2295 NW CORPORATE BLVD
City-St-Zip: BOCA RATON, FL 33134 US

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: DAVID COHEN

MGR

02/19/2008

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