

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000001098

Entity Name: CURRAN & NILES, P.L.

FILED  
Apr 17, 2008  
Secretary of State

**Current Principal Place of Business:**

2400 EAST COMMERCIAL BLVD.  
COASTAL TOWER, SUITE 208  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

2400 EAST COMMERCIAL BLVD.  
COASTAL TOWER, SUITE 208  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 20-4047488

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CURRAN, M. GLENN III  
2400 EAST COMMERCIAL BLVD.  
COASTAL TOWER, SUITE 208  
FORT LAUDERDALE, FL 33308 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: CURRAN, M. GLENN III  
Address: 2400 EAST COMMERCIAL BLVD., SUITE 208  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR (X) Delete  
Name: NILES, CHRISTOPHER D  
Address: 2400 EAST COMMERCIAL BLVD., SUITE 208  
City-St-Zip: FORT LAUDERDALE, FL 33308

**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: M. GLENN CURRAN, III

MGR

04/17/2008

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