

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000003946

**FILED**  
**Feb 16, 2007**  
**Secretary of State**

**Entity Name:** LYNN FINANCIAL CENTER, LLC

**Current Principal Place of Business:**

2501 NORTH MILITARY TRAIL  
BOCA RATON, FL 33431

**New Principal Place of Business:**

1905 NW CORPORATE BLVD  
BOCA RATON, FL 33444

**Current Mailing Address:**

2501 NORTH MILITARY TRAIL  
BOCA RATON, FL 33431

**New Mailing Address:**

1905 NW CORPORATE BLVD  
BOCA RATON, FL 33444

**FEI Number:** 20-4190439

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIEMON, CHARLES L ESQ  
433 PLAZA REAL, SUITE 339  
BOCA RATON, FL 33432 US

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

DICKENSON, DAVID B ESQ  
980 NORTH FEDERAL HIGHWAY  
SUITE 410  
BOCA RATON, FL 33432 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: DAVID B. DICKENSON

02/16/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LFC DEVELOPEMNT, LLC,  
Address: C/O JAN CARLSSON, 433 PLAZA REAL, STE 339  
City-St-Zip: BOCA RATON, FL 33432

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LFC DEVELOPMENT, LLC,  
Address: 1905 NW CORPORATE BLVD.  
City-St-Zip: BOCA RATON, FL 33444

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: LFC DEVELOPMENT, INC.

MGRM

02/16/2007

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