

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000013843

Entity Name: SSN REALTY, LLC

FILED  
Feb 11, 2007  
Secretary of State

**Current Principal Place of Business:**

7421 NORTH UNIVERSITY DRIVE  
SUITE 312  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

7421 NORTH UNIVERSITY DRIVE  
SUITE 312  
TAMARAC, FL 33321

**New Mailing Address:**

FEI Number: 20-4266792

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLAIR, LAURENCE I  
100 WEST CYPRESS CREEK ROAD  
SUITE 700  
FT. LAUDERDALE, FL 33309 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: MGRM ( ) Delete  
Name: GLASER, CHARLES I M.D.  
Address: 7421 NORTH UNIVERSITY DRIVE  
City-St-Zip: TAMARAC, FL 33321

Title: MGRM (X) Delete  
Name: ARMENAKIS, GUS M.D.  
Address: 7421 NORTH UNIVERSITY DRIVE  
City-St-Zip: TAMARAC, FL 33321

**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 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: CHARLES I GLASER, M.D.

MGRM

02/11/2007

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