

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000020520

FILED
Feb 12, 2008
Secretary of State

Entity Name: 300 WEST DEARBORN STREET, LLC.

Current Principal Place of Business:

370 WEST DEARBORN STREET
SUITE A
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

370 WEST DEARBORN STREET
SUITE A
ENGLEWOOD, FL 34223 US

New Mailing Address:

FEI Number: 20-4649118

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLER, ELAINE A
370 WEST DEARBORN STREET
SUITE A
ENGLEWOOD, FL 34233 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: MILLER, ELAINE A
Address: 370 WEST DEARBORN STREET
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: MGRM () Delete
Name: SANCHEZ, MANUEL
Address: 370 WEST DEARBORN STREET
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: MGRM () Delete
Name: BLAHA, MICHAEL R
Address: 15348 GRANTLEY DR.
City-St-Zip: CHESTERFIELD, MO 63017 US

Title: MGRM () Delete
Name: BLAHA, JEAN
Address: 15348 GRANTLEY DR.
City-St-Zip: CHESTERFIELD, MO 63017 US

Title: MGRM () Delete
Name: BLAHA, JAMES S
Address: 4930 S. WARWICK AVE.
City-St-Zip: SPRINGFIELD, MO 65804 US

Title: MGRM () Delete
Name: BLAHA, BARBARA J
Address: 4930 S. WARWICK AVE.
City-St-Zip: SPRINGFIELD, MO 65804 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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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: ELAINE A MILLER

MGRM

02/12/2008

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