

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 10, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L06000037031

1. Entity Name  
GOODHEART PROPERTIES IV, LLC



Principal Place of Business

C/O ANDREW T. LAVIN  
2699 STIRLING ROAD, SUITE B-100  
FT. LAUDERDALE, FL 33312

Mailing Address

C/O ANDREW T. LAVIN  
2699 STIRLING ROAD, SUITE B-100  
FT. LAUDERDALE, FL 33312



02252008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

20-4664495

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

LAVIN, ANDREW T  
2699 STIRLING ROAD, SUITE B-100  
FT. LAUDERDALE, FL 33312

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

**9. MANAGING MEMBERS/MANAGERS**

|                |                                 |
|----------------|---------------------------------|
| TITLE          | MGR                             |
| NAME           | LAVIN, ANDREW T                 |
| STREET ADDRESS | 2699 STIRLING ROAD, SUITE B-100 |
| CITY-ST-ZIP    | FT. LAUDERDALE, FL 33312        |

|                |  |
|----------------|--|
| TITLE          |  |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |

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| CITY-ST-ZIP    |  |

000000353685  
03/26/08-90080-008 138.75

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

*Andrew Lavin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #