

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90113 050 ***138.75

60023525



03252008 Chg-LLC CR2E083 (12/06)

DOCUMENT # L06000050007

1. Entity Name
FREEDOM PROPERTY LLC



Principal Place of Business
~~1200 NW 17TH AVE #20~~
~~DELRAY BEACH, FL 33445~~

Mailing Address
951 SW 4TH AVE
BOCA RATON, FL 33432

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.
160 CONGRESS PARK DR

Suite, Apt. #, etc.

City & State
DELRAY BEACH FL

City & State

4. FEI Number
20-4884701

Applied For
Not Applicable

Zip
33445

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLAKESBERG, JON D
951 SW 4TH AVE
BOCA RATON, FL 33432

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 translating)

DATE

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

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
HACKNER, SEAN
1200 NW 17TH AVE #20
DELRAY BEACH, FL 33445 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
160 CONGRESS PARK DR
DELRAY BEACH, FL 33445

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
HACKNER, RYAN
1200 NW 17TH AVE
DELRAY BEACH, FL 33445 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
160 CONGRESS PARK DR

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
KOSTENBAUDER, ROBERT
1200 NW 17TH AVE
DELRAY BEACH, FL 33445 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
160 CONGRESS PARK DR

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
GARFIELD, JEFF
1200 NW 17TH AVE
DELRAY BEACH, FL 33445 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
160 CONGRESS PARK DR

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

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

4/1/08

Date

800 390 2948

Daytime Phone #