

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054411

FILED
Apr 22, 2007
Secretary of State

Entity Name: SHAWNEE BUSINESS CENTER, LLC

Current Principal Place of Business:

3300 PGA BLVD., SUITE 620
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

3300 PGA BOULEVARD
620
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

3300 PGA BLVD., SUITE 620
PALM BEACH GARDENS, FL 33410

New Mailing Address:

3300 PGA BOULEVARD
620
PALM BEACH GARDENS, FL 33410

FEI Number: 20-4942469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEHON, FREDERIC T JR. P.A
5606 PGA BLVD
SUITE 211
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

MCALEES, JOSHUA
3300 PGA BOULEVARD
620
PALM BEACH GARDENS, FL 33410 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: JOSHUA MCALEES

04/22/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: MCALEES, JOSHUA
Address: 3300 PGA BLVD., STE. 620
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: MGRM () Change (X) Addition
Name: ROE, BRYAN
Address: 3300 PGA BLVD., STE. 620
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

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: JOSHUA MCALEES

MGRM

04/22/2007

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