

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089173

FILED
Sep 08, 2007
Secretary of State

Entity Name: HARRISON SPECIAL SERVICES AGENCY LLC

Current Principal Place of Business:

300 AVENUE OF THE ARTS
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

700 SE 3RD AVE
STE 300
FT LAUDERDALE, FL 333161154 US

Current Mailing Address:

416 NE 1 AVENUE
4
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

700 SE 3RD AVE
STE 300
FT LAUDERDALE, FL 333161154 US

FEI Number: 02-0786447 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HARRISON, MICHAEL D
416 NE 1 AVENUE
4
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

HARRISON, MICHAEL D
700 SE 3RD AVE
STE 300
FORT LAUDERDALE, FL 333161154 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: MICHAEL D. HARRISON

09/08/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HARRISON, MICHAEL D
Address: 416 NE 1 AVENUE #4
City-St-Zip: FORT LAUDERDALE, FL 33301 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HARRISON, MICHAEL D
Address: 700 SE 3RD AVE
City-St-Zip: FORT LAUDERDALE, FL 333161154 US

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: MICHAEL D. HARRISON

MGR

09/08/2007

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