


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L06000091143</b> 1. Entity Name THE EXECUTIVE BUILDING OF PLANTATION, L.L.C.	
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Principal Place of Business <b>640 MOCKINGBIRD LANE PLANTATION, FL 33443</b>	Mailing Address <b>640 MOCKINGBIRD LANE PLANTATION, FL 33443</b>
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**DO NOT WRITE IN THIS SPACE**



01242008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number <b>59-2729365</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>MCWILLIAMS, MARK D ESQ. 4600 N. OCEAN BLVD., SUITE 206 BOYNTON BEACH, FL 33435</b>
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**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008 Fee will be \$538.75</b>	<b>U000000875603</b> <b>04/11/08-80040-008 138.75</b>
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR HOECKER, NORWOOD 640 MOCKINGBIRD LANE PLANTATION, FL 33443</b>
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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.

<b>SIGNATURE:</b> <u>Norwood Hoecker</u> <b>NORWOOD HOECKER</b> <u>3/22/08</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date</small> <u>3/22/08</u>	<small>Daytime Phone #</small> 
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(954) 443-9444 (954) 801-0113