

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000091967

**FILED**  
**Jan 10, 2007**  
**Secretary of State**

**Entity Name:** SHERIDAN FAMILY MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

11419 LITTLE BEAR WAY  
BOCA RATON, FL 33428 US

**New Principal Place of Business:**

**Current Mailing Address:**

11419 LITTLE BEAR WAY  
BOCA RATON, FL 33428 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHERIDAN, JAMES D  
11419 LITTLE BEAR WAY  
BOCA RATON, FL 33428 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SHERIDAN, JAMES D  
Address: 11419 LITTLE BEAR WAY  
City-St-Zip: BOCA RATON, FL 33428 US

Title: MGRM ( ) Delete  
Name: SHERIDAN, MARIA  
Address: 11419 LITTLE BEAR WAY  
City-St-Zip: BOCA RATON, FL 33428 FL

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES D SHERIDAN

MGRM

01/10/2007

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