

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000092947

Entity Name: DANIELS COMMONS, LLC

FILED
Mar 22, 2007
Secretary of State

Current Principal Place of Business:

12555 ORANGE DRIVE
SUITE 100
DAVIE, FL 33330 US

New Principal Place of Business:

12401 ORANGE DRIVE
SUITE 100
DAVIE, FL 33330 US

Current Mailing Address:

12555 ORANGE DRIVE
SUITE 100
DAVIE, FL 33330 US

New Mailing Address:

12401 ORANGE DRIVE
SUITE 100
DAVIE, FL 33330 US

FEI Number: 20-5624131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIMMERMAN, HOWARD J
12555 ORANGE DRIVE
SUITE 100
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

ZIMMERMAN, HOWARD J
13551 S.W. 34 COURT
DAVIE, FL 33330 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:

03/22/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ZIMMERMAN, HOWARD J
Address: 12555 ORANGE DRIVE, SUITE 100
City-St-Zip: DAVIE, FL 33330 US

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ZIMMERMAN, HOWARD J
Address: 13551 S.W. 34 COURT
City-St-Zip: DAVIE, FL 33330 US

Title: MGR () Change (X) Addition
Name: ORLOVE, L. MICHAEL
Address: 2600 ISLAND BLVD. PH#2
City-St-Zip: AVENTURA, FL 33160 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: HOWARD J. ZIMMERMAN

MGR

03/22/2007

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