

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094808

Entity Name: 16 ON CENTER LLC

FILED  
Jul 05, 2007  
Secretary of State

## Current Principal Place of Business:

7025 CR 46A SUITE 1071 #358  
LAKE MARY, FL 32746

## New Principal Place of Business:

7025 CR 46A  
SUITE 1071 #358  
LAKE MARY, FL 32746

## Current Mailing Address:

7025 CR 46A SUITE 1071 #358  
LAKE MARY, FL 32746

## New Mailing Address:

7025 CR 46A  
SUITE 1071 #358  
LAKE MARY, FL 32746

FEI Number: 20-5628765      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

## Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: OBRIEN, MATTHEW J  
Address: 7025 CR 46A SUITE 1071 #358  
City-St-Zip: LAKE MARY, FL 32746

## ADDITIONS/CHANGES:

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

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: MATTHEW J OBRIEN

MGR

07/05/2007

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