

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000114015

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: GREAT VIEWS, LLC

**Current Principal Place of Business:**

92 NOTTINGHAM PLACE  
BOYNTON BEACH, FL 33426 US

**New Principal Place of Business:**

19353 SKYRIDGE CIRCLE  
BOCA RATON, FL 33498 US

**Current Mailing Address:**

92 NOTTINGHAM PLACE  
BOYNTON BEACH, FL 33426 US

**New Mailing Address:**

19353 SKYRIDGE CIRCLE  
BOCA RATON, FL 33498 US

FEI Number: 33-1194432

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COHEN, JOEL D  
92 NOTTINGHAM PLACE  
BOYNTON BEACH, FL 33436 US

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

COHEN, JOEL D  
19353 SKYRIDGE CIRCLE  
BOCA RATON, FL 33498 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: JOEL D. COHEN

01/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ORLEN, MELISSA H  
Address: 19353 SKYRIDGE CIRCLE  
City-St-Zip: BOCA RATON, FL 33498 US

Title: MGR ( ) Delete  
Name: COHEN, JOEL D  
Address: 92 NOTTINGHAM PLACE  
City-St-Zip: BOYNTON BEACH, FL 33426 US

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: COHEN, JOEL D  
Address: 19353 SKYRIDGE CIRCLE  
City-St-Zip: BOCA RATON, FL 33498 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: MELISSA H. ORLEN

MGR

01/14/2009

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