

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000121264

FILED  
Jul 06, 2007  
Secretary of State

**Entity Name:** PROFESSIONAL SERVICES OF COCONUT GROVE, LLC

**Current Principal Place of Business:**

2 BALA PLAZA, SUITE 300  
BALA CYNWYD, PA 19004

**New Principal Place of Business:**

3908 LEAFY WAY  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

2 BALA PLAZA, SUITE 300  
BALA CYNWYD, PA 19004

**New Mailing Address:**

3908 LEAFY WAY  
COCONUT GROVE, FL 33133

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

MUNROE, W. BRADLEY ESQ  
239 EAST VIRGINIA STREET  
TALLAHASSEE, FL 32301 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: SPEYER, DEBRA G ESQ  
Address: 2 BALA PLAZA, SUITE 300  
City-St-Zip: BALA CYNWYD, PA 19004

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SPEYER, DEBRA G ESQ  
Address: 3908 LEAFY WAY  
City-St-Zip: COCONUT GROVE, FL 33133

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: DEBRA G SPEYER

PRES

07/06/2007

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