

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000008676

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: 1107 LLC

**Current Principal Place of Business:**

15 INNINGWOOD ROAD  
OSSINING, NY 10562

**New Principal Place of Business:**

**Current Mailing Address:**

15 INNINGWOOD ROAD  
OSSINING, NY 10562

**New Mailing Address:**

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

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

ROSE, ELLEN  
SUN TRUST INTERNATIONAL CENTER  
ONE SOUTHEAST 3RD AVE #2950  
MIAMI, FL 33131 US

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

ROSE, ELLEN  
2699 S BAYSHORE DR  
7TH FLOOR  
MIAMI, FL 33133 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: \_\_\_\_\_ 04/14/2009  
Electronic Signature of Registered Agent                      Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GOLDBERG, BARBARA S  
Address: 15 INNINGWOOD ROAD  
City-St-Zip: OSSINING, NY 10562

**ADDITIONS/CHANGES:**

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

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

Title: MGR ( ) Change (X) Addition  
Name: GOLDBERG, ERIC  
Address: 15 INNINGWOOD ROAD  
City-St-Zip: OSSINING, NY 10562

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: ERIC GOLDBERG                      MGR                      04/14/2009  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date