

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000027061

Entity Name: AMMD, LLC

FILED  
Jul 10, 2008  
Secretary of State

## Current Principal Place of Business:

C/O 7000 W. PALMETTO PARK ROAD  
310  
BOCA RATON, FL 33433 US

## Current Mailing Address:

C/O 7000 W. PALMETTO PARK ROAD  
310  
BOCA RATON, FL 33433 US

## New Principal Place of Business:

C/O 7000 W. PALMETTO PARK ROAD  
205  
BOCA RATON, FL 33433 US

## New Mailing Address:

C/O 7000 W. PALMETTO PARK ROAD  
205  
BOCA RATON, FL 33433 US

FEI Number: 26-0821150      FEI Number Applied For ( )      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:

BLOSHINSKY, GREGORY S ESQ.  
7000 W. PALMETTO PARK ROAD  
310  
BOCA RATON, FL 33433 US

## Name and Address of New Registered Agent:

BLOSHINSKY, GREGORY S ESQ.  
7000 W. PALMETTO PARK ROAD  
205  
BOCA RATON, FL 33433 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:

07/10/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

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

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: ROTH, JERRY  
Address: 1220 CASTEC DRIVE  
City-St-Zip: SACRAMENTO, FL 95864 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: GREGORY S. BLOSHINSKY, ESQ.

RA

07/10/2008

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