

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000081701

**FILED**  
**Apr 02, 2010**  
**Secretary of State**

**Entity Name:** NIGHTHAWK MANAGERS, LLC

**Current Principal Place of Business:**

4990 S.W. 52ND STREET, SUITE 201  
DAVIE, FL 33314

**New Principal Place of Business:**

**Current Mailing Address:**

4990 S.W. 52ND STREET, SUITE 201  
DAVIE, FL 33314

**New Mailing Address:**

**FEI Number:** 45-0568910

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROWARS, CHARLES M  
4990 S.W. 52ND STREET, SUITE 201  
DAVIE, FL 33314 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: MGR  
Name: ROWARS, CHARLES M  
Address: 4990 S.W. 52ND STREET, SUITE 201  
City-St-Zip: DAVIE, FL 33314

Title: MGR  
Name: EDELMAN, DORI  
Address: 10557 N.W. 53RD STREET  
City-St-Zip: SUNRISE, FL 33351

I hereby 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: CHARLES M ROWARS

MGR

04/02/2010

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