

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105231

FILED  
Apr 10, 2008  
Secretary of State

**Entity Name:** EMERALD ALLOCATION STRATEGIES,LLC

**Current Principal Place of Business:**

2843 EXECUTIVE PARK DRIVE  
WESTON, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

2843 EXECUTIVE PARK DRIVE  
WESTON, FL 33331

**New Mailing Address:**

**FEI Number:** 26-1248469

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BORKSON, ELLIOT  
1313 SOUTH ANDREWS AVE.  
FT. LAUDERDALE, FL 33316 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 ( ) Delete  
Name: HUNTER, SCOT  
Address: 2843 EXECUTIVE PARK DRIVE  
City-St-Zip: WESTON, FL 33331

Title: MGR ( ) Delete  
Name: ISBITTS, ROBERT  
Address: 2843 EXECUTIVE PARK DRIVE  
City-St-Zip: WESTON, FL 33331

Title: MGR ( ) Delete  
Name: BUDELMAN, ALLAN  
Address: 2843 EXECUTIVE PARK DRIVE  
City-St-Zip: WESTON, FL 33331

**ADDITIONS/CHANGES:**

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

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

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

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: SCOT L. HUNTER

MGR

04/10/2008

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