## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT #1 07000112599



**FILED** Jan 28, 2008 8:00 am Secretary of State

1. Entity Name LONGWOOD STREET LLC							01-28-2008 9	90073 002 3	***138	.75	
Principal Place 8020 FLAGLE WEST PALM S	ER COURT		Mailing Address 8020 FLAGLER COURT WEST PALM BEACH, FL 33405								
2. Principal Pl	lace of Busin	ness - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01102008	Chg-LLC	CR2E083 (	(12/06)		
City & State			City & State			4. FEI Numbe	372695	 i		plied For Applicable	
Zip	Country		Zip	Country			of Status Desired	□ \$5.	.00 Addi	itional	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
DIVINE DI ALCOVA MARTINI O CELLADI. D.A.					Name						
DIVINE, BLALOCK, MARTIN & SELLARI, P.A. 420 COLUMBIA DRIVE, STE. 110 WEST PALM BEACH, FL. 33409					Street Address (P.O. Box Number is Not Acceptable)						
					City			F.	Zip Code	,	
The above named entity submits this statement for the purpose of changing its register					r L						
	named entit ions of regist		the purpose of changing its	registere	ed office or registe	red agent, or bot	n, in the State of Flo	rida. I am fami	iliar with, a	and accept	
SIGNATURE .	Signature, typed	or printed name of registered agent a	and title if applicable. (NOT	E: Registere	d Agent's gnature require	d when reinstating)		DATE			
							Make check payable to Florida Department of State				
		FEE IS \$138.75 Fee will be \$538.75	i							•	
				10.				Department			
After May		Fee will be \$538.75		10.	:		Florida	<b>Department</b> CHANGES		Addition	
After May	MGR REESE, (	MANAGING MEMBER  COURTNEY D	R\$/MANAGERS	TIT LE	E		Florida	<b>Department</b> CHANGES	of State		
9. TITLE NAME STREET ADDRESS	MGR REESE, 0 8020 FLA	MANAGING MEMBER COURTNEY D GLER COURT	R\$/MANAGERS	TITLE NAM STRE	E Et address		Florida	<b>Department</b> CHANGES	of State		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR REESE, ( 8020 FLA WEST PA	MANAGING MEMBER  COURTNEY D	R\$/MANAGERS	TITLE NAM STRE CITY	E ET ADDRESS - ST - ZIP		Florida	Department	of State	Addition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGR REESE, ( 8020 FLA WEST PA	MANAGING MEMBER COURTNEY D IGLER COURT ALM BEACH, FL 33405	R\$/MANAGERS	TITLE NAM STRE CITY	E ET ADDRESS -ST-ZIP		Florida	Department	of State		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR REESE, ( 8020 FLA WEST PA MGR FARRELL	MANAGING MEMBER COURTNEY D GLER COURT	R\$/MANAGERS	TITLE NAM STRE CITY TITLE NAM	E ET ADDRESS -ST-ZIP		Florida	Department	of State	Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: COVENERY D PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 561 - 742 - 4211 Daytime Phone \*