

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115303

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** 805 W. BROWARD BLVD, LLC

**Current Principal Place of Business:**

805 W. BROWARD BLVD  
FT. LAUDERDALE, FL 33312

**New Principal Place of Business:**

**Current Mailing Address:**

805 W. BROWARD BLVD  
FT. LAUDERDALE, FL 33312

**New Mailing Address:**

4731 S LAKE DRIVE  
DELRAY BEACH, FL 33436

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

JONATHAN H. GREEN & ASSOCIATES, P.A.  
799 BRICKELL PLAZA, SUITE 700  
MIAMI, FL 33131 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: MGRM  
Name: LEAVITT FAMILY LIMITED LIABILITY LIMITED P  
Address: 1018 SW 8TH STREET  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: MGRM  
Name: NOCERINI FAMILY LIMITED LIABILITY LIMITED  
Address: 13045 CORONADO TERRACE  
City-St-Zip: NORTH MIAMI, FL 33181

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: COLE LEAVITT

MGR

04/16/2012

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