

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000002274

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** ASSOCIATION FOR DEVELOPMENTALLY DISABLED ADULTS AND ADOLESCENTS, LLC

**Current Principal Place of Business:**

19549 ESTUARY DRIVE  
BOCA RATON, FL 33498 US

**New Principal Place of Business:**

**Current Mailing Address:**

19549 ESTUARY DRIVE  
BOCA RATON, FL 33498 US

**New Mailing Address:**

FEI Number: 74-3246766      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CLAYMAN, DAVID A  
19549 ESTUARY DRIVE  
BOCA RATON, FL 33498 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: CLAYMAN, DAVID A  
Address: 19549 ESTUARY DRIVE  
City-St-Zip: BOCA RATON, FL 33498

Title: MGR ( ) Delete  
Name: HERSKOWITZ, VALERIE  
Address: 12545 ORANGE DRIVE  
City-St-Zip: DAVIE, FL 33330

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CLAYMAN, DAVID A  
Address: 19549 ESTUARY DRIVE  
City-St-Zip: BOCA RATON, FL 33498

Title: MGRM (X) Change ( ) Addition  
Name: HERSKOWITZ, VALERIE  
Address: 7261 160TH ST. N  
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: DAVID A. CLAYMAN, MD

MRGM

04/29/2009

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