

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000091048

Entity Name: 1700 MAIN STREET, LLC

FILED  
Mar 24, 2009  
Secretary of State

## Current Principal Place of Business:

1700 MAIN STREET  
PALM BAY, FL 32905

## New Principal Place of Business:

## Current Mailing Address:

4000 HOLLYWOOD BLVD.  
STE. 435 SOUTH  
HOLLYWOOD, FL 33021

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COHEN, MARK D  
4000 HOLLYWOOD BLVD.  
STE. 435 SO.  
HOLLYWOOD, FL 33021 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: NACRON, ROBERT  
Address: 10521 S.W. 123RD STREET  
City-St-Zip: MIAMI, FL 33176

Title: MGRM ( ) Delete  
Name: NACRON FAMILY, LLC,  
Address: 10521 S.W. 123RD STREET  
City-St-Zip: MIAMI, FL 33176

Title: MGRM ( ) Delete  
Name: HELEN M. THOMPSON AS, TRUSTEE OF THE HELEN  
Address: 224 MASTERS DRIVE SOUTH  
City-St-Zip: PEACHTREE CITY, GA 30269

## 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: ROBERT NACRON

MGR

03/24/2009

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