

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000098685

FILED  
Jun 17, 2009  
Secretary of State

Entity Name: CONCERNED CITIZENS OF COCONUT CREEK, LLC

**Current Principal Place of Business:**

4799 COCONUT CREEK PARKWAY  
# 230  
COCONUT CREEK, FL 33063 US

**New Principal Place of Business:**

**Current Mailing Address:**

4799 COCONUT CREEK PARKWAY  
# 230  
COCONUT CREEK, FL 33063 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MARTINEZ, AL  
4766 NW 5 COURT  
COCONUT CREEK, FL 33063 US

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:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: MARTINEZ, AL  
Address: 4766 NW 5 COURT  
City-St-Zip: COCONUT CREEK, FL 33063

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

Title: MGRM ( ) Delete  
Name: AHLBUM, JON  
Address: 660 NW 49 AVENUE  
City-St-Zip: COCONUT CREEK, FL 33063

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

Title: MGRM ( ) Delete  
Name: MARTONE, MARK  
Address: 4770 NW 9 STREET  
City-St-Zip: COCONUT CREEK, FL 33063

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

Title: MGRM ( ) Delete  
Name: KNAUSS, BRENDA  
Address: 4966 NW 6 STREET  
City-St-Zip: COCONUT CREEK, FL 33063

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

Title: MGRM ( ) Delete  
Name: AFFLERBACK, JIM  
Address: 4955 NW 10 STREET  
City-St-Zip: COCONUT CREEK, FL 33063

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: AL MARTINEZ

MGRM

06/17/2009

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