

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000059457

**FILED**  
**Mar 27, 2010**  
**Secretary of State**

**Entity Name:** SGF MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

2801 N. UNIVERSITY DRIVE  
SUITE 301  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

2801 N. UNIVERSITY DRIVE  
SUITE 301  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

**FEI Number:** 27-0400945

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIEGELAUB, STEVEN  
2801 N. UNIVERSITY DRIVE  
SUITE 301  
CORAL SPRINGS, FL 33065 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:** SIEGELAUB, STEVEN  
**Address:** 2801 N. UNIVERSITY DRIVE, SUITE 301  
**City-St-Zip:** CORAL SPRINGS, FL 33065 US

**Title:** MGRM  
**Name:** FELLER, JOEL  
**Address:** 2801 N. UNIVERSITY DRIVE, SUITE 301  
**City-St-Zip:** CORAL SPRINGS, FL 33065 US

**Title:** MGRM  
**Name:** GOLDING, STEPHEN  
**Address:** 2801 N. UNIVERSITY DRIVE, SUITE 301  
**City-St-Zip:** CORAL SPRINGS, FL 33065 US

**Title:** MGRM  
**Name:** POMERANTZ, ROY  
**Address:** 2801 N. UNIVERSITY DRIVE, SUITE 301  
**City-St-Zip:** CORAL SPRINGS, FL 33065 US

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:** STEVEN SIEGELAUB

MGRM

03/27/2010

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