2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L98000001419

1. Entity Name

CANTERBURY ASSOCIATES L.C.

Taylor William

ROBERTS, NORMAN T ESQ.

50 WEST MASHTA DRIVE, SUITE 2 KEY BISCAYNE, FL 33149



Principal Place of Business

5900 STIRLING RD

SUITE 9B

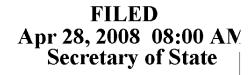
HOLLYWOOD, FL 33021

Mailing Address

5900 STIRLING RD

SUITE 9B

HOLLYWOOD, FL 33021





DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 65-0848368

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

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DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of char ions of registered agent.	iging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATŲRE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature (equired when reinstating)	DATE
FILE After May	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		,
9.	MANAGING MEMBERS/MANAGERS	96. 1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MORROW, ILANA 5900 STIRLING RD SUITE 9B HOLLYWOOD, FL 33021		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			

11. I hereby certify that the information supplied with his filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this report is true and char my 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 true faceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/13/08

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