

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000004891

FILED
Apr 28, 2008
Secretary of State

Entity Name: FARREN STEELE PROPERTIES LLC

Current Principal Place of Business:

1498 SW 10TH ST
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

1498 SW 10TH ST
BOCA RATON, FL 33486

New Mailing Address:

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

Name and Address of Current Registered Agent:

FARREN, WARD
1498 SW 10TH ST
BOCA RATON, FL 33486 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: FARREN, WARD
Address: 1498 SW 10TH ST
City-St-Zip: BOCA RATON, FL 33486

Title: MGR () Delete
Name: FARREN, VALERIE
Address: 1498 SW 10TH ST
City-St-Zip: BOCA RATON, FL 33486

Title: MGR () Delete
Name: STEELE, DEBORAH J
Address: 5932 MICHAUX STREET
City-St-Zip: BOCA RATON, FL 33433

Title: MGR () Delete
Name: STEELE, GORDON L
Address: 5932 MICHAUX STREET
City-St-Zip: BOCA RATON, FL 33433

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:

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: WARD FARREN

MGR

04/28/2008

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