

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jun 05, 2007 8:00 am**  
**Secretary of State**

06-05-2007 90156 025 \*\*\*\*50.00

**DOCUMENT # L99000007680**

1. Entity Name  
1600 WEST OAKLAND PARK, L.L.C.



Principal Place of Business  
1600 WEST OAKLAND PARK BOULEVARD  
FORT LAUDERDALE, FL 33311

Mailing Address  
1600 WEST OAKLAND PARK BOULEVARD  
FORT LAUDERDALE, FL 33311

**60051451**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05252007 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number

65-0964519

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FAWLEY, MICHAEL R  
2518 ARBOR DRIVE  
FT. LAUDERDALE, FL 33312

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by September 14, 2007**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
CHAMBERLAIN, LAWRENCE  
2015 N. 28TH AVENUE  
HOLLYWOOD, FL 33020 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
ZEIGLER, LINDA  
2900 N.E. 15TH TERRACE  
FORT LAUDERDALE, FL 33334 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
FAWLEY, MICHAEL R  
2518 ARBOR DRIVE  
FORT LAUDERDALE, FL 33312 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
GAI, MICHAEL  
10360 GROVE LANE  
COOPER CITY, FL 33328 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this 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 accurate and that 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 the receiver 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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

ATTACHMENT

60051451



ZIMMERMAN ZEIGLER & CHAMBERLAIN, P.A.

*Certified Public Accountants*

1600 WEST OAKLAND PARK BLVD., SUITE 202

FT. LAUDERDALE, FLORIDA 33311

(954) 486-1995 FAX: (954) 486-2399

May 25, 2007

Department of State  
Division of Corporations  
P.O. Box 6478  
Tallahassee, FL 32314

RE: ~~1600 West Oakland Park Blvd., LLC~~  
Document #L99000007680

To Whom It May Concern:

This letter is written as authorization to correct the spelling of one of the members from Ziegler, Linda to Zeigler, Linda, as indicated on the attached signed document. We appreciate your assistance in rectifying this matter. If you need additional information, please do not hesitate to contact us.

Sincerely,

A handwritten signature in cursive script that reads "Linda Zeigler".  
Linda Zeigler, Member

LMZ/sd