#### 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

### **DOCUMENT # M00000001570**

1. Entity Name 5300 PALISADES AVENUE ASSOCIATES, L.L.C.



Mailing Address

Principal Place of Business 2378 NW 64TH STREET BOCA RATON, FL 33496

2378 NW 64TH STREET BOCA RATON, FL 33496

## FILED Jan 09, 2008 08:00 Al Secretary of State



01042008 No Chg-LLC

CR2E083 (12/07)

FEI Number
 22-3556471

Applied For Not Applicab

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

DO NOT WRITE IN THIS SPACE

GOLDBERG, VONNI 2378 NW 64TH STREET BOCA RATON, FL 33496

SIGNATURE

# DO NOT WRITE IN THIS SPACE

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, an	nd accep
	the obligations of registered agent.	

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 (NOTE: Registered Agent signature required when reinstating)

U00000778002

01/10/08-80030-018 138.75

9. MANAGING MEMBERS/MANAGERS **MGRM** TITLE NAME GOLDBERG, VONNI **2378 NW 64TH STREET** STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33496 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

# DO NOT WRITE IN THIS SPACE

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.

CICNATURE.

a: Goldberg