2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002022

35 NE 40TH ST.

MIAMI, FL 33137

Address:

City-St-Zip:

Entity Name: PFM DADE ADVISORS, LLC

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: TWO LOGAN SQUARE #1600, 18TH & ARCH ST PHILADELPHIA, PA 191032770 **Current Mailing Address: New Mailing Address:** TWO LOGAN SQUARE #1600, 18TH & ARCH ST PHILADELPHIA, PA 191032770 FEI Number: 52-2313372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete MATTEO, BRETT Name: Name: TWO LOGAN SQUARE #1600, 18TH & ARCH ST Address: Address: City-St-Zip: PHILADELPHIA, PA 191032770 City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: BOYLE, STEVE Name: Address: TWO LOGAN SQUARE #1600, 18TH & ARCH ST Address: City-St-Zip: PHILADELPHIA, PA 191032770 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition WISHER, LAVON Name: Name: TWO LOGAN SQUARE #1600, 18TH & ARCH ST Address: Address: City-St-Zip: PHILADELPHIA, PA 191032770 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: MASVIDAL, RAUL Name: 201 ALHAMBRA CIR #1401 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition MCFARLANE, CHRIS Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: STEVE BOYLE MGR 01/04/2007