

FILED
Mar 24, 2008 08:00 AM
Secretary of State

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M03000000467

1. Entity Name

STARKEY ROAD ASSOCIATES, L.L.C.



Principal Place of Business

5801 CONGRESS AVENUE
BOCA RATON, FL 33434

Mailing Address

5801 CONGRESS AVENUE
BOCA RATON, FL 33434

DO NOT WRITE IN THIS SPACE



03112008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number

04-3691307

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOMBACH, GEOFFREY S ESQ.
500 EAST BROWARD BLVD.
SUITE 1950
FT. LAUDERDALE, FL 33394

**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, 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 _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000869193
04/09/08-80035-023 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	WOLF, STEVE
STREET ADDRESS	5801 CONGRESS AVENUE
CITY-ST-ZIP	BOCA RATON, FL 33487

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
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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.

SIGNATURE: _____

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

Date

Daytime Phone #

3/20/08 561 4985600