

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003659

FILED  
May 12, 2008  
Secretary of State

Entity Name: SH/LM MANAGEMENT LLC

**Current Principal Place of Business:**

10 WOODBRIDGE CENTER DRIVE  
SUITE 420  
WOODBIDGE, NJ 07095

**New Principal Place of Business:**

**Current Mailing Address:**

10 WOODBRIDGE CENTER DRIVE  
SUITE 420  
WOODBIDGE, NJ 07095

**New Mailing Address:**

FEI Number: 04-3700936      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: MGRM ( ) Delete  
Name: MARKOWITS, ALEXANDER C  
Address: 10 WOODBRIDGE CENTER DR. STE 420  
City-St-Zip: WOODBRIDGE, NJ 07095

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: ALEXANDER MARKOWITS

MGRM

05/12/2008

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