## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M04000000090

Entity Name: 2600 ISLAND BOULEVARD, LLC

FILED Apr 08, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

7900 ISLAND BLVD. 17780 COLLINS AVE AVENTURA, FL 33160

2ND FLR

SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:** New Mailing Address:

17780 COLLINS AVE 7900 ISLAND BLVD

AVENTURA, FL 33160 2ND FLR

SUNNY ISLES BEACH, FL 33160

FEI Number: 65-0665393 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:

MGRM Title: () Delete (X) Change ( ) Addition WILLIAMS ISLAND HOLD, INGS, INC. WILLIAMS ISLAND HOLD, INGS, INC. Name: Name:

7900 ISLAND BLVD. Address: 4000 ISLAND BLVD., PH2 Address: City-St-Zip: AVENTURA, FL 33160 City-St-Zip: AVENTURA, FL 33160

Title: PS Title: () Delete () Change () Addition

MATUS, ALAN Name: Name: Address: 4000 ISLAND BLVD., PH2 Address: City-St-Zip: AVENTURA, FL 33160 City-St-Zip:

Title: EVP () Delete Title: () Change () Addition

LIEB, JAMES Name: Name: 4000 ISLAND BLVD., PH2 Address: Address: City-St-Zip: AVENTURA, FL 33160 City-St-Zip:

Title: SVP ( ) Delete Title: () Change () Addition

Name: ELBERT, DONALD Name: 4000 ISLAND BLVD., PH2 Address: Address: City-St-Zip: AVENTURA, FL 33160 City-St-Zip:

Title: AVP () Delete Title: () Change () Addition

TORPEY, CARITE Name: Name: 4000 ISLAND BLVD., PH2 Address: Address: City-St-Zip: AVENTURA, FL 33160 City-St-Zip:

Title: () Delete Title: () Change () Addition

CIACCHI, BETTY Name: Name: Address: 4000 UISLAND BLVD., PH2 Address: AVENTURA, FL 33160 City-St-Zip: 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: DONALD J ELBERT 04/08/2008