

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003598

FILED  
Jul 16, 2008  
Secretary of State

Entity Name: SANDY LANE RESIDENTIAL LLC

## Current Principal Place of Business:

C/O SANDY LANE RESIDENTIAL LLC  
2399 COLLINS AVENUE  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

## Current Mailing Address:

100 RING ROAD WEST  
SUITE 101  
GARDEN CITY, NY 11530 US

## New Mailing Address:

FEI Number: 03-0547809      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.  
121 ALHAMBRA PLAZA, STE 1000  
C/O DAVID H. ROGEL, ESQ.  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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:

Title: DIR ( ) Delete  
Name: ACHENBAUM, WILLIAM  
Address: 100 RING ROAD WEST, SUITE 101  
City-St-Zip: GARDEN CITY, NY 11530 US

Title: DIR ( ) Delete  
Name: ACHENBAUM, MICHAEL  
Address: 100 RING ROAD WEST, SUITE 101  
City-St-Zip: GARDEN CITY, NY 11530 US

Title: DIR ( ) Delete  
Name: KOSSMAN, MURRAY  
Address: 100 RING ROAD WEST, SUITE 101  
City-St-Zip: GARDEN CITY, NY 11530 US

Title: PRES ( ) Delete  
Name: ACHENBAUM, WILLIAM  
Address: 100 RING ROAD WEST, SUITE 101  
City-St-Zip: GARDEN CITY, NY 11530 US

Title: SEC ( ) Delete  
Name: KOSSMAN, MURRAY  
Address: 100 RING ROAD WEST, SUITE 101  
City-St-Zip: GARDEN CITY, NY 11530 US

Title: TREA ( ) Delete  
Name: ACHENBAUM, MICHAEL  
Address: 100 RING ROAD WEST, SUITE 101  
City-St-Zip: GARDEN CITY, NY 11530 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MURRAY KOSSMAN

MR

07/16/2008

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