

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED  
May 19, 2005  
Secretary of State

DOCUMENT# M04000005291

Entity Name: PEMBROKE PROPERTIES, LLC

**Current Principal Place of Business:**

2 OAK STREET EAST  
EAST FARMINGDALE, NY 11735

**New Principal Place of Business:**

**Current Mailing Address:**

2 OAK STREET EAST  
EAST FARMINGDALE, NY 11735

**New Mailing Address:**

FEI Number: 14-1906297      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:**

STEWART, MICHAEL  
4703 SW 185 AVE.  
MIRAMAR, FL 33029      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/MEMBERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: LORD, THOYWELL A  
Address: 2 OAK STREET EAST  
City-St-Zip: EAST FARMINGDALE, NY 11735

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

Title: MGRM ( ) Delete  
Name: STEWART, MICHAEL  
Address: 4703 SW 185TH STREET  
City-St-Zip: MIRAMAR, FL 33029

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

Title: MGRM ( ) Delete  
Name: LORD, GARY A  
Address: 115-47 224 STREET  
City-St-Zip: CAMBRIA HEIGHTS, NY 11411

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

Title: MGRM ( ) Delete  
Name: LORD, OSWALD T  
Address: 109-50 212 STREET  
City-St-Zip: CAMBRIA HEIGHTS, NY 11411

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

Title: MGRM ( ) Delete  
Name: LORD, IAN  
Address: 109-50 212 STREET  
City-St-Zip: CAMBRIA HEIGHTS, NY 11411

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

Title: MGRM ( ) Delete  
Name: LORD, JACQUELINE S  
Address: 115-47 224 STREET  
City-St-Zip: CAMBRIA HEIGHTS, NY 11411

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOYWELL A LORD

PRES

05/19/2005

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