

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000001954

Entity Name: L S BROWARD COUNTY, LLC

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

159 S. MAIN STREET  
SUITE 600  
AKRON, OH 44308

**New Principal Place of Business:**

**Current Mailing Address:**

159 S. MAIN STREET  
SUITE 600  
AKRON, OH 44308

**New Mailing Address:**

FEI Number: 20-2610449

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BMD FLORIDA SERVICE, LLC  
800 WEST MONROE STREET  
JACKSONVILLE, FL 32202 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: MGR  
Name: FLMSM, LLC  
Address: 159 S. MAIN STREET, SUITE 500  
City-St-Zip: AKRON, OH 44308

I hereby 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: JOHN F. MARTIN, ASST. SEC. OF FLMSM, LLC

MGR

04/20/2011

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