

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000022

Entity Name: CENTRAL LEWMAR LLC

FILED
Jul 17, 2007
Secretary of State

Current Principal Place of Business:

575 E. SWEDESFORD ROAD, SUITE 210
WAYNE, PA 19087

New Principal Place of Business:

Current Mailing Address:

575 E. SWEDESFORD ROAD, SUITE 210
WAYNE, PA 19087

New Mailing Address:

FEI Number: 20-3738034 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

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:

Title: MGR () Delete
Name: SEGALL, GREGORY L
Address: 575 E. SWEDESFORD ROAD, SUITE 210
City-St-Zip: WAYNE, PA 19087

Title: MGR () Delete
Name: HALPERN, PAUL L
Address: 575 E. SWEDESFORD ROAD, SUITE 210
City-St-Zip: WAYNE, PA 19087

Title: MGR () Delete
Name: QUINN, WILLIAM
Address: 575 E. SWEDESFORD ROAD, SUITE 210
City-St-Zip: WAYNE, PA 19087

Title: MGR () Delete
Name: STERN, LESLIE
Address: 575 E. SWEDESFORD ROAD, SUITE 210
City-St-Zip: WAYNE, PA 19087

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:

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: LESLIE STERN

MGR

07/17/2007

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