

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001390

Entity Name: EL-AD GB4 LLC

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

1301 INTERNATIONAL PKWY, SUITE 200
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

1301 INTERNATIONAL PKWY, SUITE 200
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 20-4416873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, STE 4
WESTON, FL 33331 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 () Delete
Name: MANOR, JOSEPH
Address: 1301 INTERNATIONAL PKWY, SUITE 200
City-St-Zip: SUNRISE, FL 33323

Title: MGR () Delete
Name: BRONFMAN, ARIK
Address: 1301 INTERNATIONAL PKWY, STE 200
City-St-Zip: SUNRISE, FL 33323

Title: MGR () Delete
Name: DANIELL, ORLY
Address: 575 MADISON AVE., 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: MGR () Delete
Name: ROWELL, ROBERT K
Address: 141 PEAKED MOUNTAIN ROAD
City-St-Zip: TOWNSHEND, VT 05353

Title: MGR () Delete
Name: WINRICH, JOSEPH K
Address: 141 PEAKED MOUNTAIN ROAD
City-St-Zip: TOWNSHEND, VT 05353

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:

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: JOSEPH MANOR

P

04/08/2009

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