2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 04, 2008 8:00 am
Secretary of State

04-30-2008 90032 049 ***138.75

30008763

DOCUMENT # M07000000478

1. Entity Name
GRANDPARENTS.COM, LLC

Principal Place of Business
5100 TOWN CENTER CIRCLE
BOCA RATON, FL 33486

Mailing Address
5100 TOWN CENTER CIRCLE
BOCA RATON, FL 33486

2. Principal Place of Business - No P.O. Box # 2080 NW Boca Raton Blvd
Suite, Apt. #, etc. Ste. 6
City & State Boca Raton Fl
Zip 33431 Country Palm Bch

3. Mailing Address 2080 NW Boca Raton Blvd
Suite, Apt. #, etc. Ste 6
City & State Boca Raton
Zip FL Country Palm Bch

04282008 Chg-LLC CR2E083 (12/06)

4. FEI Number 03-0398886 Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
RUBIN, GARY
5100 TOWN CENTER CIRCLE
BOCA RATON, FL 33486

7. Name and Address of New Registered Agent
Name GARY RUBIN
Street Address (P.O. Box Number is Not Acceptable) 2080 NW Boca Raton Blvd Ste 6
City Boca Raton FL Zip Code 33431

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 4/29/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE	MGRM	☐ Delete
NAME	TWS PARTNERSHIP	
STREET ADDRESS	5100 TOWN CENTER CIRCLE	
CITY-ST-ZIP	BOCA RATON, FL 33486	
TITLE	MGRM	☐ Delete
NAME	LASER PARTNERS I, LP	
STREET ADDRESS	5100 TOWN CENTER CIRCLE	
CITY-ST-ZIP	BOCA RATON, FL 33486	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS / CHANGES

TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	2080 NW Boca Raton Blvd Ste 6	
CITY-ST-ZIP	Boca Raton, Fl 33431	
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	2080 NW Boca Raton Blvd Ste. 6	
CITY-ST-ZIP	Boca Raton, Fl 33431	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ 4/29/08
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #