2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000004788

Entity Name: BROKEN SOUND UNITED (6111) LLC

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6111 BROKEN SOUND PARKWAY NW, SUITE 350 6111 BROKEN SOUND PKWY NW BOCA RATON, FL 33487

SUITE 350

BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

6111 BROKEN SOUND PARKWAY NW, SUITE 350 6111 BROKEN SOUND PKWY NW

BOCA RATON, FL 33487 SUITE 350 BOCA RATON, FL 33487

FEI Number: 20-2746873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCHMIER, JEFFREY L SCHMIER, JEFFREY L

6111 BROKEN SOUND PKWY NW 6111 BROKEN SOUND PARKWAY NW, SUITE 350 BOCA RATON, FL 33487 SUITE 350

BOCA RATON, FL 33487 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: JEFFREY SCHMIER 04/22/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change () Addition

SCHMIER, JEFFREY L Name: Name: SCHMIER, JEFFREY L

Address: 6111 BROKEN SOUND PARKWAY NW, SUITE 350 Address: 6111 BROKEN SOUND PKWY NW, SUITE 350

City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: BOCA RATON, FL 33487

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: JEFFREY SCHMIER 04/22/2009