


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M99000000554</b> 1. Entity Name FLAGLER STREET ASSOCIATES, LLC	
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Principal Place of Business 36 NORTHEAST 1ST STREET MIAMI, FL	Mailing Address 555 LONG WHARF DRIVE, SUITE 14 NEW HAVEN, CT 06511
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**DO NOT WRITE IN THIS SPACE**

04222008No Chg-LLC CR2E083 (12/07)

4. FEI Number 06-1029532	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HELLER, JONATHAN A ESQ  
888 BRICKELL AVENUE, 6TH FLOOR  
MIAMI, FL 33131

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

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

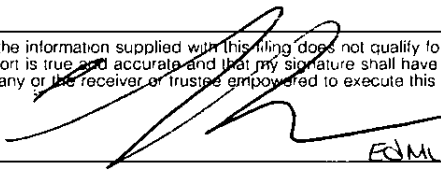
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FUSCO, EDMUND J 555 LONG WHARF DRIVE, #14 NEW HAVEN, CT 06511
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UD00000942279  
05/29/08-80013-011 138.75

**DO NOT WRITE  
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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:**  **Edmund J. Fusco Manager** 4/24/08 203-777-7451

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #