


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 01, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # L02000016488  
 1. Entity Name  
 COLONY CLUB APARTMENTS AT BOYNTON DEVELOPMENT CO. LLC



Principal Place of Business 400 POST AVENUE WESTBURY, NY 11590	Mailing Address 400 POST AVENUE WESTBURY, NY 11590
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**DO NOT WRITE IN THIS SPACE**



04252007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 74-3051037	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 SEATON, HARRY L ESQ.  
 7350 LA CHALET BLVD.  
 BOYNTON BEACH, FL 33437

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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00  
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONTER, ELLIOT 400 POST AVE WESTBURY, NY 11590
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONTER, GERALD 400 POST AVE WESTBURY, NY 11590
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONTER, MARILYN 400 POST AVE WESTBURY, NY 11590
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000751353  
 05/18/07-80099-015 50.00

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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: Marilyn Monter Marilyn Monter 4/25/07 516-3334200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #