2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000016488

1. Entity Name

COLONY CLUB APARTMENTS AT BOYNTON

DEVELOPMENT CO. LLC



Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

400 POST AVENUE WESTBURY, NY 11590 400 POST AVENUE WESTBURY, NY 11590

FILED May 01, 2008 08:00 AN Secretary of State



04292008 No Chq-LLC

CR2E083 (12/07)

FEI Number
 74-3051037

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

SEATON, HARRY L ESQ. 7350 LA CHALET BLVD. BOYNTON BEACH, FL 33437

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. the obligations of registered agent. | I am familiar with, and accept |
|----|---|--------------------------------|
| SI | GNATI IRE | |

(NOTE: Registered Agent signature required when reinstating)

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

U00000941882 05/28/08-80124-011 138.75

| 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 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |

DO NOT WRITE IN THIS SPACE

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:

Thy

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4/30/0

516-333-400