


FILED
Jun 29, 2006 8:00 am
Secretary of State

05-04-2006 90017 003 ****50.00

**2006 LIMITED LIABILITY COMPANY
 ANNUAL REPORT**

DOCUMENT # L05000095385			
1. Entity Name SUMMIT COMMONS, LLC			
Principal Place of Business 4524 GUN CLUB ROAD SUITE 212 WEST PALM BEACH, FL 33415		Mailing Address 4524 GUN CLUB ROAD SUITE 212 WEST PALM BEACH, FL 33415	
2. Principal Place of Business 8845 N. Military Trail Suite, Apt. #, etc. Suite 100 City & State Palm Beach Gardens, FL Zip 33410		3. Mailing Address 8845 N. Military Trail Suite, Apt. #, etc. Suite 100 City & State Palm Beach Gardens, FL Zip 33410	
Country		Country	
33410		33410	
Country		Country	
Palm Beach		Palm Beach	
4. FEI Number 20-3544909		Applied For <input type="checkbox"/> \$5.00 Additional Fee Required <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		7. Name and Address of New Registered Agent Name Reichel, William B. Street Address (P.O. Box Number is Not Acceptable) 8845 N. Military Trail, Ste. 100 City Palm Beach Gardens FL Zip Code 33410	
8. Name and Address of Current Registered Agent REICHEL, WILLIAM B 4524 GUN CLUB ROAD SUITE 212 WEST PALM BEACH, FL 33415		7. Name and Address of New Registered Agent Name Reichel, William B. Street Address (P.O. Box Number is Not Acceptable) 8845 N. Military Trail, Ste. 100 City Palm Beach Gardens FL Zip Code 33410	
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 <i>William B. Reichel</i>		DATE 4/27/06	
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	Managing Member
STREET ADDRESS		STREET ADDRESS	Reichel, William
CITY - ST - ZIP		CITY - ST - ZIP	8845 N. Military Trail, #100 Palm Beach Gardens, FL 33410
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	Managing member
STREET ADDRESS		STREET ADDRESS	Hamilton, Harry
CITY - ST - ZIP		CITY - ST - ZIP	800 N. Flagler Drive West Palm Beach, FL 33401
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	Managing member
STREET ADDRESS		STREET ADDRESS	Arsenault, Gerard
CITY - ST - ZIP		CITY - ST - ZIP	800 N. Flagler Drive West Palm Beach, FL 33401
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		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: <i>William B. Reichel</i>		DATE 4/27/06 561 478-4440	
SIGNATURE AND TITLE OR PRINTED NAME OF ISSUING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	

5/51

30011386



03062006 Chg-LLC CR2E083 (11/05)

4. FEI Number
20-3544909

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

7. Name and Address of New Registered Agent
Name
Reichel, William B.
Street Address (P.O. Box Number is Not Acceptable)
8845 N. Military Trail, Ste. 100
City
Palm Beach Gardens FL Zip Code
33410

Filing Fee is \$50.00
Due by May 1, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

10. ADDITIONS/CHANGES	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Managing Member
STREET ADDRESS	Reichel, William
CITY - ST - ZIP	8845 N. Military Trail, #100 Palm Beach Gardens, FL 33410
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Managing member
STREET ADDRESS	Hamilton, Harry
CITY - ST - ZIP	800 N. Flagler Drive West Palm Beach, FL 33401
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Managing member
STREET ADDRESS	Arsenault, Gerard
CITY - ST - ZIP	800 N. Flagler Drive West Palm Beach, FL 33401
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *William B. Reichel* DATE: 4/27/06 561 478-4440

SIGNATURE AND TITLE OR PRINTED NAME OF ISSUING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date