

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 28, 2006  
Secretary of State**

DOCUMENT# L05000096216

Entity Name: XENA BLOSSOM, LLC

**Current Principal Place of Business:**

5100 TOWN CENTER CIRCLE, SUITE 430  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

5100 TOWN CENTER CIRCLE, SUITE 430  
BOCA RATON, FL 33486

**New Mailing Address:**

FEI Number: 20-4046176      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

E.H.G. RESIDENT AGENTS, INC.  
5100 TOWN CENTER CIRCLE, SUITE 430  
BOCA RATON, FL 33486 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: LEE, ROBERT E  
Address: 5100 TOWN CENTER CIRCLE, SUITE 430  
City-St-Zip: BOCA RATON, FL 334861021

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT E. LEE

MGR

03/28/2006

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date