## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000103139

Entity Name: 1075 N.W. BROKEN SOUND PARKWAY, LLC

FILED Jul 14, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5400 BROKEN SOUND BOULEVARD N.W., STE 500 1075 BROKEN SOUND PARKWAY NW, SUITE 100

ATTN: JOHN SLAVIC ATTN: JOHN SLAVIC

BOCA RATON, FL 33487 US

Current Mailing Address: New Mailing Address:

5400 BROKEN SOUND BOULEVARD N.W., STE 500 1075 BROKEN SOUND PARKWAY NW, SUITE 100

ATTN: JOHN SLAVIC ATTN: JOHN SLAVIC

BOCA RATON, FL 33487 US

FEI Number: 20-3654001 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

KRAMER, WILLIAM S SLAVIC, JOHN J
GREENSPOON MARDER P.A 1075 BROKEN S

GREENSPOON MARDER, P.A. 1075 BROKEN SOUND PARKWAY NW

2255 GLADES ROAD, SUITE 411-E SUITE 100

BOCA RATON, FL 33431 US BOCA RATON, FL 33487 US

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: JOHN J SLAVIC 07/14/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

Name: SLAVIC, JOHN SULVENT Name: SLAVIC, JOHN J
Address: 5400 BROKEN SOUND BOULEVARD N.W., STE 500 Address: 1075 BROKEN SOUND PARKWAY NW, SUITE 100

City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: BOCA RATON, FL 33487 US

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

Name: SANDLER, MICHAEL A Name: SANDLER, MICHAEL A

Address: 5400 BROKEN SOUND BOULEVARD N.W., STE 500 Address: 1075 BROKEN SOUND PARKWAY NW, SUITE 100

City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: BOCA RATON, FL 33487 US

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: JOHN J SLAVIC MGR 07/14/2006