


FILED  
 Jan 22, 2004 08:00 AM  
 Secretary of State

**2004 LIMITED LIABILITY COMPANY  
 ANNUAL REPORT**

**DOCUMENT # L99000001515**  
 1. Entity Name  
 2060 PARTNERS OF BOCA RATON, L.L.C.



Principal Place of Business 709 ELM TREE LANE BOCA RATON, FL 33486	Mailing Address 709 ELM TREE LANE BOCA RATON, FL 33486
--	--

**DO NOT WRITE IN THIS SPACE**



01072004No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0950667	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 SLATTERY, PAUL  
 2060 NW BOCA RATON BLVD. #2  
 BOCA RATON, FL 33431

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registrant, agent and title if applicable. (NOTE: Registrant/Agent signature required when reinstating.) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
 Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SLATTERY, LEONORA M 709 ELM TREE LANE BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SLATTERY, PAUL 5758 VISTA LINDA LANE BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**

000000010078  
 01/22/04-00015-017 55.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 *Leonora M. Slattery* 1-19-04 511-391 3018