

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # M02000002659**

1. Entity Name  
**WHITEREAL BOCA I LLC**



Principal Place of Business  
**2255 GLADES ROAD STE. 223A  
BOCA RATON, FL 33431**

Mailing Address  
**2255 GLADES ROAD STE. 223A  
BOCA RATON, FL 33431**



01052006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**EISNER, DEBBI  
2255 GLADES ROAD STE. 223A  
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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE	<b>MGRM</b>
NAME	<b>IOWICK HOLDING, L.L.C.</b>
STREET ADDRESS	<b>2255 GLADES ROAD STE. 223A</b>
CITY- ST- ZIP	<b>BOCA RATON, FL 33431</b>

TITLE	
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05/05/06-80116-013 50.00

**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 person or persons authorized to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE** *Debbi S. Eisner* **PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #