

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001107

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Entity Name:** EL-AD AVALON AT NORTHBROOK LLC

**Current Principal Place of Business:**

1301 INTERNATIONAL PKWY; STE 200  
SUNRISE, FL 33323

**New Principal Place of Business:**

1000 S. PINE ISLAND ROAD SUITE # 450  
PLANTATION, FL 33324

**Current Mailing Address:**

1301 INTERNATIONAL PKWY; STE 200  
SUNRISE, FL 33323

**New Mailing Address:**

1000 S. PINE ISLAND ROAD SUITE # 450  
PLANTATION, FL 33324

FEI Number: 20-4322953

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: MGRM  
Name: EL-AD AVALON NORTHBROOK MGMT, LLC.  
Address: 1000 S. PINE ISLAND ROAD SUITE # 450  
City-St-Zip: PLANTATION, FL 33324

Title: MGR  
Name: BARBER, JOHN P  
Address: 1209 ORANGE STREET  
City-St-Zip: WILMINGTON, DE 19801 US

I hereby 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: RAANAN PERSKY

SEC

03/12/2012

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