

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062429

FILED  
Jul 11, 2006  
Secretary of State

Entity Name: BG LAND ACQUISITIONS, LLC

**Current Principal Place of Business:**

4800 N. FEDERAL HIGHWAY, STE. 200E  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

4800 N. FEDERAL HIGHWAY, STE. 200E  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 20-1529297      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:**

MONAHAN, TIMOTHY E  
54 NE 4TH AVENUE  
DELRAY BEACH, FL 33483      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      ( ) Delete  
Name: BANKIER, M. ADAM  
Address: 4800 N. FEDERAL HIGHWAY, STE. 200E  
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM      ( ) Delete  
Name: GOLDBERG, AVERY  
Address: 334 E. 74TH STREET, 6B  
City-St-Zip: NEW YORK, NY 10021

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: M. ADAM BANKIER

MGRM

07/11/2006

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