

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001107

Entity Name: EL-AD AVALON AT NORTHBROOK LLC

Current Principal Place of Business:

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

Current Mailing Address:

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

FEI Number: 20-4322953

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name EL-AD AVALON NORTHBROOK MGMT, LLC.
Address 1000 S. PINE ISLAND ROAD SUITE # 450
City-State-Zip: PLANTATION FL 33324

Title SPRINGING MEMBER
Name ZIMMER, STEVEN P
Address 1209 ORANGE STREET
City-State-Zip: WILMINGTON DE 19801

Title SECRETARY
Name MOHAR, ARAVA
Address 1000 S. PINE ISLAND ROAD SUITE # 450
City-State-Zip: PLANTATION FL 33324

Title CFO
Name BRONFMAN, ARIK
Address 1000 S. PINE ISLAND ROAD SUITE # 450
City-State-Zip: PLANTATION FL 33324

Title CHAIRMAN
Name DANIELL, ORLY
Address 575 MADISON AVE. 22 FLOOR
City-State-Zip: NEW YORK NY 10022

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ARAVA MOHAR

SEC

03/06/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date