

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000397

Entity Name: CYNOSURE, L.L.C.

FILED
Mar 02, 2006
Secretary of State

Current Principal Place of Business:

140 ROYAL PALM WAY
201
PALM BEACH, FL 33480

Current Mailing Address:

140 ROYAL PALM WAY
201
PALM BEACH, FL 33480

New Principal Place of Business:

700 VILLAGE SQUARE CROSSING
103
PALM BEACH GARDENS, FL 33410

New Mailing Address:

700 VILLAGE SQUARE CROSSING
103
PALM BEACH GARDENS, FL 33410

FEI Number: 65-0973329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULTZ, AMY E
700 NORTH OLIVE AVENUE
WEST PALM BEACH, FL 33401 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: THALER, MANLEY H
Address: 700 NORTH OLIVE AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: SCHOLLA, PETER
Address: 140 ROYAL PALM WAY #201
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: SCHOLLA, PETER
Address: 700 VILLAGE SQUARE CROSSING, # 103
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: PETER SCHOLLA

MGMR

03/02/2006

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