

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 07, 2006 8:00 am
Secretary of State

07-07-2006 90064 017 ****50.00

DOCUMENT # L00000001432

1. Entity Name
PRELUDE PROPERTIES GROUP, L.L.C.



Principal Place of Business

521 OLD DIXIE HWY
TEQUESTA, FL 33469

Mailing Address

521 OLD DIXIE HWY
TEQUESTA, FL 33469



06212006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
65-0978877

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROTHENBERG, JUDITH A
521 OLD DIXIE HWY
TEQUESTA, FL 33469

**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 September 6, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
ROTHENBERG, BRUCE M
521 OLD DIXIE HWY
TEQUESTA, FL 334692234

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
ROTHENBERG, JUDITH A
521 OLD DIXIE HWY
TEQUESTA, FL 334692234

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Bruce M. Rothenberg

6/29/06

561-743-9974

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

Date

Daytime Phone #