

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L00000002546

1. Entity Name
BONITA PROPERTIES, LLC



Principal Place of Business
**900 MELALEUCA ROAD, 1ST FLOOR
DELRAY BEACH, FL 33483**

Mailing Address
**900 MELALEUCA ROAD, 1ST FLOOR
DELRAY BEACH, FL 33483**

DO NOT WRITE IN THIS SPACE

FILED
Apr 10, 2006 8:00 am
Secretary of State

03-29-2006 90022 030 ****50.00

30004560



03112006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
94-3362912

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LEVIN, JEFFREY
900 MELALEUCA ROAD, 1ST FLOOR
DELRAY BEACH, FL 33483**

**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 resigning)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
LEVIN, JEFFREY
900 MELALEUCA ROAD, 1ST FLOOR
DELRAY BEACH, FL 33483**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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: _____

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

MANAGER

4/1/06 561-330-6773

Date

Daytime Phone #