2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000006252

1. Entity Name
HALLANDALE PLACE, LLC

Principal Place of Business	Mailing Address
201 ALHAMBRA CIR SUITE 602 CORAL GABLES, FL 33134	201 ALHAMBRA CIR SUITE 602 CORAL GABLES, FL 33134

01122006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1072571
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

FULLER, ALLEN D
201 ALHAMBRA CIR
SUITE 602
CORAL GABLES, FL 33134

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7. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FULLER, JOHN 12000 BISCAYNE BLVD #609 N. MIAMI, FL 33181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOLDSTEIN, ALAN 5 CANNON POINT/OCEAN REEF CLUB KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MBR FULLER, ALLEN D 201 ALHAMBRA CIRCLE, SUITE 602 CORAL GABLES, FL 33134
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01/30/06-80096-001 50.00

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8. 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: _____ 1/18/06 (305)445-715
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #