

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

B.E.B. FILED
Apr 22, 2004 08:00 AM
285 Secretary of State

DOCUMENT # L00000012841

1. Entity Name
NB TAMARAC COMMERCE CENTER, LLC



Principal Place of Business
2005 WEST CYPRESS CREEK RD., STE. 202
FT. LAUDERDALE, FL 33309

Mailing Address
2005 WEST CYPRESS CREEK RD., STE. 202
FT. LAUDERDALE, FL 33309



04192004No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1053438

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BUTTERS, NATHAN
2005 W CYPRESS CREEK RD STE 202
FORT LAUDERDALE, FL 33309

**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 re-natating)

DATE _____

Filing Fee is \$50.00
Due by May 1, 2004

000000124309
04/22/04-80039-004 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD BUTTERS, NATHAN 2005 W. CYPRESS CREEK RD. SUITE 202 FT. LAUDERDALE, FL 33309
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Date

Daytime Phone #