

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90024 021 ****50.00

DOCUMENT # L00000013945

1. Entity Name
CBD PARKING, LLC



Principal Place of Business

5295 TOWN CENTER ROAD, 3RD FLOOR
BOCA RATON, FL 33486

Mailing Address

5295 TOWN CENTER ROAD, 3RD FLOOR
BOCA RATON, FL 33486

24053104



04202004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1065941

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SCHOLL, HARVEY
5295 TOWN CENTER ROAD, 3RD FLOOR
BOCA RATON, FL 33486

**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 May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME SCHOLL, HARVEY
STREET ADDRESS 5295 TOWN CENTER ROAD, 3RD FLOOR
CITY-ST-ZIP BOCA RATON, FL 33486

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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 #

4/21/04

(561) 417-7111