2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L0100008580

1. Entity Name CRESCENT BEACH PLAZA, LLC

Principal Place of Business
ST AUGUSTINE, FLORIDA

6975 A1A SOUTH
SAINT AUGUSTINE, FL. 32086

Mailing Address

341 EAST 149TH ST. BRONX, NY 10451

FILED Feb 13, 2006 8:00 am Secretary of State

02-13-2006 90195 041 ****50.00

6011000



02062006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

LAT PURSER & ASSOCIATES, INC 6320 ST AUGUSTINE RD SUITE 7 JACKSONVILLE, FL 32217

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The above named entity submits this statement for the purpose of chan the obligations of registered agent.	ging its registered office or registered agent, or bo	oth, in the State of Florida. I	am familiar with, and accept
SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	DA	TE .

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

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	LEVITES, BARRY 1
STREET ADDRESS	LEVITES REALTY, 341 E 149 ST
CITY-ST-ZIP	BRONX, NY 10451
TITLE	MGRM
NAME	RETTNER, RONALD
STREET ADDRESS	RETTNER MANAGEMENT CORP 481 MAIN ST
CITY-ST-ZIP	NEW ROCHELLE, NY 10801
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
11 Lboroby	portify that the information available with this filling does not qualify for the

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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 deciver 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

2110106

Daytime Phone #