

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 04, 2004 8:00 am
Secretary of State

06-04-2004 90271 019 ***150.00

DOCUMENT # L01000009308

1. Entity Name
MELTON RANCH L.L.C.



Principal Place of Business

4875 NORTH FEDERAL HIGHWAY 7TH FLOOR
FT. LAUDERDALE, FL 33308

Mailing Address

4875 NORTH FEDERAL HIGHWAY 7TH FLOOR
FT. LAUDERDALE, FL 33308

DO NOT WRITE IN THIS SPACE



03142003 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
65-1115043

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ROSENBERG, ARTHUR R
4875 NORTH FEDERAL HIGHWAY 7TH FLOOR
FT. LAUDERDALE, FL 33308

**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 September 8, 2004**

9. MANAGING MEMBERS/MANAGERS

| | |
|----------------|--------------------------------------|
| TITLE | MGR |
| NAME | FEISS, JOEL S |
| STREET ADDRESS | 4875 NORTH FEDERAL HIGHWAY 7TH FLOOR |
| CITY-ST-ZIP | FT. LAUDERDALE, FL 33308 |

| | |
|----------------|--------------------------------------|
| TITLE | MGR |
| NAME | FEISS, PEARL |
| STREET ADDRESS | 4875 NORTH FEDERAL HIGHWAY 7TH FLOOR |
| CITY-ST-ZIP | FT. LAUDERDALE, FL 33308 |

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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 #

5/21/04

917 414 1226