
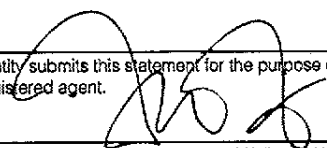
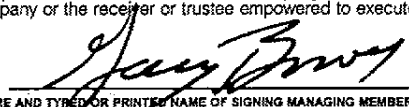


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 06, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000016520</b>		
1. Entity Name BOWER/VERO BEACH, LLC		
Principal Place of Business ONE S.E. 3RD AVE., STE. <del>2400</del> 2450 MIAMI, FL 33131	Mailing Address ONE S.E. 3RD AVE., STE. <del>2400</del> 2450 MIAMI, FL 33131	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  FEUERMAN, JONATHAN ESQ. THERREL BAISDEN, PA-SUNTRUST INTERNATIONAL ONE S.E. 3RD AVE., STE. <del>2400</del> 2450 MIAMI, FL 33131		<b>DO NOT WRITE IN THIS SPACE</b>
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:  <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOWER, WILLIAM J III 15173 SW 34TH ST DAVIE, FL 33331	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOWER, GARY 1374 NW 139TH TERRACE PEMBROKE PINES, FL 33028	
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. 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:  01/21/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		



01102006No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
65-1060774

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

UN0000423418  
02/18/06-80007-006 50.00