

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000000955

1. Entity Name
JLA REALTY ADVISORS, LLC



Principal Place of Business
5000 TREX AVENUE
BOCA RATON, FL 33431

Mailing Address
5000 TREX AVENUE
BOCA RATON, FL 33431



02042005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

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

ROTHMAN, FRED B
5000 TREX AVE STE 150
BOCA RATON, FL 33431

**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, 2005**

U00000360926
05/05/05-80054-005 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME ROTHMAN, FRED G
STREET ADDRESS 5000 T-REX AVE STE 150
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE MGR
NAME ROTHMAN, JODI S
STREET ADDRESS 500 T-REX AVE STE 150
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE
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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 #