


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L02000001250 1. Entity Name POINTE 23 APARTMENTS, L.L.C.	
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FILED
May 02, 2006 08:00 AM
Secretary of State

Principal Place of Business P.O. BOX 24943 FORT LAUDERDALE, FL 33307	Mailing Address P.O. BOX 24943 FORT LAUDERDALE, FL 33307
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03272006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2252137	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

BANTA, BRADFORD C
4050 N.E. 1ST AVE., STE. 117
OAKLAND PARK, FL 33334

**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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BANTA, CATHERINE M P.O. BOX 24943 FORT LAUDERDALE, FL 33307
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BANTA, BRADFORD C P.O. BOX 24943 FORT LAUDERDALE, FL 33307
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05/17/06-80134-010 50.00

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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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Bradford C. Banta 4-13-06 954 566 0759
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #