## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L02000001944**

1. Entity Name 1226-1230 ROEBUCK COURT, LLC



FILED Apr 03, 2006 08:00 AM Secretary of State

Principal Place of Business

332 SOUTH COUNTY ROAD PALM BEACH, FL 33480 Mailing Address

332 SOUTH COUNTY ROAD PALM BEACH, FL 33480



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

03052006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 04-3592493 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RODDY, ROBERT ANDREW 332 SOUTH COUNTY ROAD PALM BEACH, FL 33480

## DO NOT WRITE IN THIS SPACE

| the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                               |                                                              |                                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------|
| SIGNATURE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Signature, typed or printed name of registered agent and lifte it applicable. | (NOTE: Registered Agent signature required when repretating) | DATE                                             |
| Filing Fee is \$50.00<br>Due by May 1, 2006                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                               |                                                              |                                                  |
| 9.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | MANAGING MEMBERS/MANAGERS                                                     |                                                              | <del></del>                                      |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | MGRM                                                                          |                                                              | ·-                                               |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | RODDY, ROBERT A                                                               |                                                              |                                                  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 332 SOUTH COUNTY RD                                                           |                                                              |                                                  |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | PALM BEACH, FL 33480                                                          |                                                              |                                                  |
| RETLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                               | 1                                                            |                                                  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                               |                                                              | 149.500.000.000                                  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                               | į.                                                           | U00000490380<br>04/18/06-80049-013 50 <b>.00</b> |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                               |                                                              | 04/18/06-80043-013 50.00                         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                               | <b>.</b>                                                     |                                                  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                               | 1                                                            |                                                  |
| STREET ADDRESS<br>CRTY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                               | חח                                                           | NOT WRITE                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | _ <del></del>                                                                 |                                                              |                                                  |
| STRLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                               | I IN                                                         | THIS SPACE                                       |
| NAME<br>STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                               |                                                              |                                                  |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                               |                                                              |                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                               | - <del></del>                                                |                                                  |
| TITLE<br>NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                               | l l                                                          |                                                  |
| STREET ADORESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                               | 3                                                            |                                                  |
| CiTY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                               | 1                                                            |                                                  |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                               | ———— <b>—</b>                                                |                                                  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                               | <b>j</b>                                                     |                                                  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                               | 1                                                            |                                                  |
| CHY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                               | 1                                                            |                                                  |
| 11. I hereby certily 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 ceth; that I am a managing member or manager of the limited fiability company or the receiver or trustee empowered to execute this report as required by Chapter 5th, Florida Statutes. |                                                                               |                                                              |                                                  |

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