

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016488

**FILED**  
**Feb 13, 2009**  
**Secretary of State**

**Entity Name:** COLONY CLUB APARTMENTS AT BOYNTON DEVELOPMENT CO. LLC

**Current Principal Place of Business:**

400 POST AVENUE  
WESTBURY, NY 11590

**New Principal Place of Business:**

**Current Mailing Address:**

400 POST AVENUE  
WESTBURY, NY 11590

**New Mailing Address:**

**FEI Number:** 74-3051037

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SEATON, HARRY L ESQ.  
7350 LA CHALET BLVD.  
BOYNTON BEACH, FL 33437 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: D ( ) Delete  
Name: MONTER, ELLIOT  
Address: 400 POST AVE  
City-St-Zip: WESTBURY, NY 11590

Title: D ( ) Delete  
Name: MONTER, GERALD  
Address: 400 POST AVE  
City-St-Zip: WESTBURY, NY 11590

Title: D ( ) Delete  
Name: MONTER, MARILYN  
Address: 400 POST AVE  
City-St-Zip: WESTBURY, NY 11590

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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:** MARILYN MONTER

VP

02/13/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date