


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2005 08:00 AM
Secretary of State

| | |
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| DOCUMENT # L02000025733 |  |
| 1. Entity Name 7693 SPRINGWATER PLACE 101, LLC | |

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|---|---|
| Principal Place of Business 1201 HAYES STREET TALLAHASSEE, FL 32301 | Mailing Address 1201 HAYES STREET TALLAHASSEE, FL 32301 |
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DO NOT WRITE IN THIS SPACE



01282005No Chg-LLC

CR2E083 (10/03)

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|---|---------------------------------------|
| 4. FEI Number 81-0574477 | Applied For Not Applicable |
| 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 CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 |
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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.

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| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and true if applicable</small> | (NOTE: Registered Agent signature required when reinstating) | DATE _____ |
|---|--|------------|

Filing Fee is \$50.00
Due by May 1, 2005

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM LANDERMAN, KENNETH 1214 CHANNEL DRIVE, CHANNEL CLUB TOWER MONMOUTH BEACH, NJ 07750 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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02/28/05-80088-001 55.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

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|---|
| SIGNATURE: <u>Ken Landerman</u> <u>Ken Landerman</u> <u>2/17/05</u> <u>732-804-0830</u> |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> |