## 2006 LIMITED LIABILITY COMPANY

## ...... ANNUAL REPORT FILED Apr 14, 2006 08:00 AN DOCUMENT # L02000028158 **Secretary of State** PALM BEACH LAKES, L.L.C. Mailing Address Principal Place of Business P.O. BOX 85 P.O. BOX 85 WEST PALM BEACH, FL 33402 WEST PALM BEACH, FL 33402 02172006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3719094 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent JOHNSON, SCOTT A DO NOT WRITE 505 E. FLAGLER DRIVE, SUITE 1010 WEST PALM BEACH, FL 33401 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS g. MGR TITLE JOHNSON, RICHARD S JR NAME STREET ADDRESS P.O. BOX 85 CITY-ST-ZIP WEST PALM BEACH, FL 33402 UQQ0000509539^M MGR TITLE 04/28/06-80047-018 50.00^M JOHNSON, SCOTT A NAME P.O. BOX 85 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33402 MGR TITLE KOENIG, PATRICK C NAME P.O. BOX 85 STREET ADDRESS DO NOT WRITE CITY-ST-ZIP WEST PALM BEACH, FL 33402 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

THE NAME STREET ADDRESS CITY-ST-ZIP KILE MAME STREET ADDRESS CITY-ST-ZIP

3.3.06

561.655.7200

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