2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000031908

1. Entity Name

FORUM SHOPPES OF BOYNTON BEACH, LLC



Secretary of State 02-07-2006 90072 044 ****50.00

FILED

Feb 07, 2006 8:00 am

Principal Place of Business

SIGNATURE:

2101 CORPORATE BLVD. NW, STE. 300

BOCA RATON, FL 33431

Mailing Address

2101 CORPORATE BLVD. NW, STE. 300 BOCA RATON, FL 33431



01192006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-2089432	Applied For Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

WEISMAN, WILLIAM S ESQ MANDEL, WEISMAN, HEIMBERG, BRODIE, ET AL 2101 CORPORATE BLVD. NW, STE. 300 BOCA RATON, FL 33431

DO	NOT	WRITE
IN	THIS	SPACE

BOCA RA	TON, FL 33431	IN I DIS SP	ACE
	•		
the obligat	named entity submits this statement for the purpose of charions of registered agent.	nging its registered office or registered agent, or both, in the State of Flor	ida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	iling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WEISMAN, WILLIAM S 2101 CORPORATE BLVD NW #300 BOCA RATON, FL 33431		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT W	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	h		
11. I hereby indicated limited lia	certify that the information supplies with this filling does not on this report is true and according and that my signature sability company or the receiver or tustee empowered to exe	qualify for the exemptions contained in Chapter 119, Florida Statutes, shall have the same legal effect as if made under oath; that I am a mar ecute this report as required by Chapter 608, Florida Statutes.	further certify that the information naging member or manager of the

Wellmai

WILLIAM

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