

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 28, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000033187**

1. Entity Name  
**BLACKBIRD EXCHANGE, LLC**



Principal Place of Business  
**4500 PGA BOULEVARD, SUITE 207  
PALM BEACH GARDENS, FL 33418**

Mailing Address  
**4500 PGA BOULEVARD, SUITE 207  
PALM BEACH GARDENS, FL 33418**

**DO NOT WRITE IN THIS SPACE**



03212006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BRANDT, PHILLIP  
4500 PGA BOULEVARD, SUITE 207  
PALM BEACH GARDENS, FL 33418**

**DO NOT WRITE  
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.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

**B. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	CONGRESS AVE. PROPERTIES, LTD.
STREET ADDRESS	4500 PGA BOULEVARD, SUITE 207
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/10/06-80054-005 50.00

**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_

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

3/27/06

Date

561-691-9030

Daytime Phone #