

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000034203

1. Entity Name
TOWERS OF DADELAND I, LLC



Principal Place of Business
**9155 SOUTH DADELAND BLVD., STE. 1812
MIAMI, FL 33156**

Mailing Address
**9155 SOUTH DADELAND BLVD., STE. 1812
MIAMI, FL 33156**



04142006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
43-1991800

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GREEN, ELIZABETH A ESQ
9155 SOUTH DADELAND BLVD., STE. 1812
MIAMI, FL 33156**

**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**

9. MANAGING MEMBERS/MANAGERS

TITLE D
NAME GREEN, HERSCHEL V
STREET ADDRESS 9155 SOUTH DADELAND BLVD., STE. 1812
CITY-ST-ZIP MIAMI, FL 33156

TITLE D
NAME BROWN, GEORGE R JR
STREET ADDRESS 9155 SOUTH DADELAND BLVD., STE. 1812
CITY-ST-ZIP MIAMI, FL 33156

TITLE D
NAME GREEN, ELIZABETH A
STREET ADDRESS 9155 SOUTH DADELAND BLVD., STE. 1812
CITY-ST-ZIP MIAMI, FL 33156

TITLE
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CITY-ST-ZIP

000000537924
05/09/06-80037-016 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

4/17/06

Date

(305) 670-1000

Daytime Phone #

Elizabeth A. Green, Director