

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000058

FILED
Jan 19, 2006
Secretary of State

Entity Name: 2115 NORTH OCEAN BOULEVARD, LLC

Current Principal Place of Business:

111 S.E. 8TH AVENUE
SUITE 601
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

2400 E. LAS OLAS BOULEVARD
STE. A
FORT LAUDERDALE, FL 33301 US

Current Mailing Address:

111 S.E. 8TH AVENUE
SUITE 601
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

2400 E. LAS OLAS BOULEVARD
STE. A
FORT LAUDERDALE, FL 33301 US

FEI Number: 01-0760206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVE, BENJAMIN E
111 S.E. 8TH AVENUE
SUITE 601
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

OLIVE, BENJAMIN E
2400 E. LAS OLAS BOULEVARD
STE. A
FORT LAUDERDALE, FL 33301 US

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.

SIGNATURE: BENJAMIN E. OLIVE

01/19/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OLIVE, BENJAMIN E
Address: 111 S.E. 8TH AVENUE, SUITE 601
City-St-Zip: FORT LAUDERDALE, FL 33301 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OLIVE, BENJAMIN E
Address: 2400 E. LAS OLAS BOULEVARD, STE. A
City-St-Zip: FORT LAUDERDALE, FL 33301 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: BENJAMIN E OLIVE

MGR

01/19/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date