

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000010521

Entity Name: NEW BERLIN PLAZA LLC

FILED
Apr 20, 2006
Secretary of State

Current Principal Place of Business:

800 TEMPLETON LANE
SAINT AUGUSTINE, FL 32095 US

New Principal Place of Business:

Current Mailing Address:

800 TEMPLETON LANE
SAINT AUGUSTINE, FL 32095 US

New Mailing Address:

FEI Number: 05-0564285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANANIA, NORMAN E JR.
800 TEMPLETON LANE
SAINT AUGUSTINE, FL 32095 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HANANIA, NORMAN E JR.
Address: 800 TEMPLETON LANE
City-St-Zip: SAINT AUGUSTINE, FL 32095 US

Title: MGRM () Delete
Name: HANANIA, NORMAN E
Address: 10550-819 BAYMEADOWS ROAD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGRM () Delete
Name: HANANIA, SAMIR N
Address: 2158 HAWKCREST DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32259 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NORMAN E. HANANIA JR.

MGRM

04/20/2006

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