

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000020366

1. Entity Name
TULIP WOODS HOUSE, LLC



Principal Place of Business
4420 N.W. 28TH WAY
BOCA RATON, FL 33434

Mailing Address
4420 N.W. 28TH WAY
BOCA RATON, FL 33434



04262006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 14-1887173	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

MANSOURIAN, GRETCHEN F
4420 N.W. 28TH WAY
BOCA RATON, FL 33434

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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 NAME STREET ADDRESS CITY ST ZIP	P MANSOURIAN, GRETCHEN 4420 NW 28TH WAY BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY ST ZIP	VP MANSOURIAN, VARTGEZ 4420 NW 28TH WAY BOCA RATON, FL 33434
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05/13/06-80034-010 50.00

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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

Date _____

Daytime Phone _____