

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90029 020 ****50.00

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03302006 Chg-LLC CR2E083 (11/05)

DOCUMENT # L03000027224 1. Entity Name COURTYARDS OF LAKE WORTH, LLC					
Principal Place of Business 2502-50 N. DIXIE HWY. LAKE WORTH, FL 33460			Mailing Address 2502-50 N. DIXIE HWY. LAKE WORTH, FL 33460		
2. Principal Place of Business 777 East Atlantic Ave. Suite, Apt. #, etc. Suite 100 City & State Delray Beach, FL Zip Country 33483 USA		3. Mailing Address 777 E. Atlantic Ave. Suite, Apt. #, etc. Suite 100 City & State Delray Beach, FL Zip Country 33483 USA			
4. FEI Number 06-1703054			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent AMOROSANA, CHRISTOPHER J 2502-50 N. DIXIE HIGHWAY LAKE WORTH, FL 33460			7. Name and Address of New Registered Agent Name Amorosana, Christopher J. Street Address (P.O. Box Number is Not Acceptable) 777 E. Atlantic Ave., Suite 100 City State Zip Code Delray Beach FL 33483		
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 Christopher J. Amorosana 4/25/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GUILLARO, ANTHONY P 532 N. BEDFORD ROAD BEDFORD HILLS, NY 10507	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AMOROSANA, CHRISTOPHER J 2502-50 N. DIXIE HIGHWAY LAKE WORTH, FL 33460	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Amorosana, Christopher J. 777 E. Atlantic Ave., Suite 100 Delray Beach, FL 33483	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Amorosana, Christopher J. 777 E. Atlantic Ave., Suite 100 Delray Beach, FL 33483	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Amorosana, Christopher J. 777 E. Atlantic Ave., Suite 100 Delray Beach, FL 33483	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Amorosana, Christopher J. 777 E. Atlantic Ave., Suite 100 Delray Beach, FL 33483	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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: Christopher J. Amorosana 4/25/06 561 441-1312 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					