2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2006
Secretary of State

DOCUMENT# L03000035193

Entity Name: ATLANTIC PAVILION, LLC

Current Principal Place of Business:

16723 MIRA VISTA LANE
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

16723 MIRA VISTA LANE
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MERLIS, NEIL
16273 MIRAVISTA LANE
DELRAY BEACH, FL 33446 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: MERLIS, NEIL
Address: 16723 MIRA VISTA LANE
City-St-Zip: DELRAY BEACH, FL 33446

Title: MGRM ( ) Delete
Name: CORMIER, MICHAEL
Address: 99 SE MIZNER BLVD #929
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition
Name: PERCEPTIVE VISIONS,, LLC
Address: 618 RENAISSANCE LN
City-St-Zip: DELRAY BEACH, FL 33483

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: MICHAEL CORMIER, MGR PERCEPTIVE VISIONS, L MGR 03/13/2006

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