

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000040429

1. Entity Name
ELMHURST SHOPPES, LLC



Principal Place of Business
**800 NORTH FLAGLER DRIVE
WEST PALM BEACH, FL 33401**

Mailing Address
**800 NORTH FLAGLER DRIVE
WEST PALM BEACH, FL 33401**



01132006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0118006

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**ARSENAULT, GERARD A
800 NORTH FLAGLER DRIVE
WEST PALM BEACH, FL 33401**

**DO NOT WRITE
IN THIS SPACE**

6. 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
**MGR
HAMILTON MGMT. CO. LTD
800 N. FLAGLER DRIVE
WEST PALM BEACH, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**000001460295
10/24/05-00015-002 \$0.00**

**DO NOT WRITE
IN THIS SPACE**

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

Harry Hamilton

3/23/06

561 655 3115