2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

May 02, 2006 8:00 am Secretary of State **DOCUMENT # L03000051611** 05-02-2006 90046 017 ****50 00 REGENCY 2500, LLC Principal Place of Business Mailing Address 980 NORTH FEDERAL HIGHWAY, SUITE 200 980 NORTH FEDERAL HIGHWAY, SUITE 200 20043384 BOCA RATON, FL 33432 BOCA RATON, FL 33432 CR2E083 (11/05) 04262006 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1121090 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SKATOFF, JEFFREY DO NOT WRITE 980 N FEDERAL HWY STE 200 BOCA RATON, FL 33432 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 and tate if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME COMPSON 2500 INVESTMENTS, LLC 980 NORTH FEDERAL HIGHWAY, SUITE 200 STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33432 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing indicated on this report is true and accurate and that my limited liability company or the receiver or trustee enpower. does not qualify ignature shall har or the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information et he same legal effect as if made under oath; that I am a managing member or manager of the speport as required by Chapter 608, Florida Statutes. execute th

SIGNATURE:

CITY-ST-ZIP

HORIZED REPRESENTATIVE

Daytime Phone #

Date

FILED