


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Mar 23, 2006 8:00 am**  
**Secretary of State**

03-23-2006 90266 032 \*\*\*\*50.00

<b>DOCUMENT # L03000055576</b>	
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1. Entity Name

ROOKERY PARK ESTATES, LLC

Principal Place of Business

1937 EAST ATLANTIC BLVD, STE 12  
POMPANO BEACH FL 33060

Mailing Address

1937 EAST ATLANTIC BLVD, STE 12  
POMPANO BEACH FL 33060

2. Principal Place of Business

3. Mailing Address

Suite, A CHANGE of Place of Business & Mailing Address.

2101 N Andrews Ave, Suite 107

City & State Wilton Manors, FL 33311

1st MOORE

CR2E083 (10/05)

4. FEI Number

20-1740913

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BEESON JR, JAMES M

2101 N Andrews Ave, Suite 107

Wilton Manors, FL 33311

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2006**

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE	MGR	<input type="checkbox"/> Delete
NAME	BEESON JR, JAMES M	
STREET ADDRESS	1937 E. ATLANTIC BLVD. STE 12	
CITY - ST - ZIP	POMPANO BEACH FL 33060	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2101 N Andrews Ave, Suite 107	
STREET ADDRESS	Wilton Manors, FL 33311	
CITY - ST - ZIP		

TITLE	MGR	<input type="checkbox"/> Delete
NAME	BEESON, MARY C	
STREET ADDRESS	1937 E. ATLANTIC BLVD. STE 12	
CITY - ST - ZIP	POMPANO BEACH FL 33060	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>2101 N Andrews Ave, Suite 107</del>	
STREET ADDRESS	Wilton Manors, FL 33311	
CITY - ST - ZIP		

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CITY - ST - ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: X [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #