

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 03, 2005 8:00 am**  
**Secretary of State**

03-03-2005 90026 026 \*\*\*\*50.00

DOCUMENT # L04000002841	
1. Entity Name ASCOT GARDENS CAPITAL, LLC	



Principal Place of Business 7800 CONGRESS AVE., SUITE 206 BOCA RATON, FL 33487	Mailing Address 7800 CONGRESS AVE., SUITE 206 BOCA RATON, FL 33487
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20017925



2. Principal Place of Business 5530 LYONS ROAD Suite, Apt. #, etc. #102	3. Mailing Address 5530 LYONS ROAD Suite, Apt. #, etc. #102
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02152005 Chg-LLC CR2E083 (10/03)

City & State COCONUT CREEK, FL	City & State COCONUT CREEK, FL
Zip 33073	Country USA
Zip 33073	Country USA

4. FEI Number 20-05 84402	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent ALCALAY, DAVID 7800 CONGRESS AVE., STE 206 BOCA RATON, FL 33487	7. Name and Address of New Registered Agent Name ERIC PURITT Street Address (P.O. Box Number is Not Acceptable) 5530 LYONS ROAD #102 City COCONUT CREEK FL Zip Code 33073
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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 ERIC PURITT DATE 2/15/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2005	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM R FUTURES INC. 7800 CONGRESS AVE., STE 206 BOCA RATON, FL 33487 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ERIC PURITT 5530 LYONS RD., #102 COCONUT CREEK, FL 33073 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALCALAY, DAVID 7800 CONGRESS AVE., STE 206 BOCA RATON, FL 33487 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HEIDI PURITT 5530 LYONS RD., #102 COCONUT CREEK, FL 33073 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CROFT INVESTMENTS LIMITED PARTNERSHIP 1900 NW CORPORATE BLVD., STE 305W BOCA RATON, FL 33431 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  ERIC PURITT 2/15/05 954-571-9562

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #