## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014105

Entity Name: S.N. CODNER, P.L.

**FILED** Feb 23, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1 SW 129TH AVENUE 1 SW 129TH AVENUE 404 POINTEBANK 404 MERCANTILE

PEMBROKE PINES, FL 33027 PEMBROKE PINES, FL 33027

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 260443

PEMBROKE PINES, FL 33026

FEI Number: 20-0757896 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CODNER, SIMONE N CODNER, SIMONE N 1 SW 129TH AVENUE 1 SW 129TH AVENUE **404 POINTEBANK** 404 MERCANTILE

PEMBROKE PINES, FL 33027 US PEMBROKE PINES, FL 33027 US

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.

Name:

SIGNATURE: SIMONE CODNER 02/23/2006

> Electronic Signature of Registered Agent Date

> > Name:

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change ( ) Addition

CODNER, SIMONE N CODNER, SIMONE N Address: 404 POINTEBANK, 1 SW 129TH AVENUE Address: 404 MERCANTILE, 1 SW 129TH AVENUE

City-St-Zip: PEMBROKE PINES, FL 33027 City-St-Zip: PEMBROKE PINES, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: SIMONE CODNER 02/23/2006