

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000020728

Entity Name: MAZOR REALTY, LLC

**FILED**  
**Jan 09, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

4400 NORTH FEDERAL HWY, #210  
BOCA RATON, FL 33431 US

**New Principal Place of Business:**

**Current Mailing Address:**

4500 CYPRESS KNEE DRIVE  
BOCA RATON, FL 33487 US

**New Mailing Address:**

7179 SAN SEBASTIAN DRIVE  
BOCA RATON, FL 33433 US

FEI Number: 20-0866447

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAZOR, SARAH  
4500 CYPRESS KNEE DRIVE  
BOCA RATON, FL 33487 US

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

MAZOR, SARAH  
7179 SAN SEBASTIAN DRIVE  
BOCA RATON, FL 33433 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.

SIGNATURE:

01/09/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MAZOR, SARAH  
Address: 4500 CYPRESS KNEE DRIVE  
City-St-Zip: BOCA RATON, FL 33487 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MAZOR, SARAH  
Address: 7179 SAN SEBASTIAN DRIVE  
City-St-Zip: BOCA RATON, FL 33433 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. 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: SARAH R MAZOR

MGRM

01/09/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date