## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000025526

Entity Name
 FORDS' MANOR VILLAGE, LLC

FILED
Mar 21, 2006 08:00 A
Secretary of State

Principal Place of Business 2070 N. OCEAN BLVD. NO. 3 BOCA RATON, FL 33431 Mailing Address
P.O. BOX 4110
BOCA RATON, FL 33429-4110



DO NOT WRITE IN THIS SPACE

02122006No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For 20-0984767 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

LEVIN, ZVI 2070 N. OCEAN BLVD. #3 BOCA RATON, FL 33431

## DO NOT WRITE 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.	
SI	GNATURE	

(NOTE Registered Agent signature required when reinstating)

Filing Fee is \$50.00

Due by May 1, 2006

//00/000476237 04/06/06-80001-014 50.00

9. MANAGING MEMBERS/MANAGERS TITLE MGR NAME LEVIN, ZVI 2070 N. OCEAN BLVD. #3 STREET ADDRESS CITY-ST-7IP BOCA RATON, FL 33431 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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11. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 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 ilmited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

JRE: 2V1 JEVIN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/20/06

561-391-9233

Daytime Phone #