

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 20,
Secre

DOCUMENT # L04000030460

1. Entity Name
DOT C PROPERTIES, LLC



Principal Place of Business
4400 TAYLOR STREET
HOLLYWOOD, FL 33021

Mailing Address
4400 TAYLOR STREET
HOLLYWOOD, FL 33021



02082006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
61-1462185

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CLARK, HOWARD P JR.
4400 TAYLOR STREET
HOLLYWOOD, FL 33021

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CLARK JR., HOWARD P 2425 CHERI LANE PEMBROKE PARK, FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EBERLY, CHERI C 5198 SW 87 AVE COOPER CITY, FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHOPSKI, JOYCE C 3751 N. 55TH AVE. HOLLYWOOD, FL 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BLENVENU, GLORIA C 611 S.W. 100TH AVE. PEMBROKE PINES, FL 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/02/06 80004-015 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE:

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

2/17/06

954-240-9143

Date

Daytime Phone #

Cheri Eberly