

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000037064		
1. Entity Name DELRAY EQUITY & LAND, LLC		
Principal Place of Business 601 N. CONGRESS AVENUE, SUITE 305 DELRAY BEACH, FL 33445		Mailing Address 601 N. CONGRESS AVENUE, SUITE 305 DELRAY BEACH, FL 33445
DO NOT WRITE IN THIS SPACE		
		04272006 No Chg-LLC CR2E083 (11/05)
4. FEI Number 20-1126954		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent CRACCHIOLO, JOHN E 601 N CONGRESS AVE STE 305 DELRAY BEACH, FL 33445		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 reinstating) DATE _____		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CRACCHIOLO, JAMES M 601 N CONGRESS AVE STE 305 DELRAY BEACH, FL 33445	U00000547058 05/12/06-80003-004 50.00 DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CRACCHIOLO, SAM A JR 601 N CONGRESS AVE STE 305 DELRAY BEACH, FL 33445	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CRACCHIOLO, JOHN E 601 N CONGRESS AVE STE 305 DELRAY BEACH, FL 33445	
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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 608, Florida Statutes.		
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE JOHN E. CRACCHIOLO, MANAGING MEMBER		4-27-06 (561)243-9800 Date Daytime Phone #