

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 22, 2005 8:00 am**  
**Secretary of State**

04-22-2005 90052 046 \*\*\*\*50.00

**DOCUMENT # L04000045278**

1. Entity Name  
**DURANT MOB INVESTORS LLC**



Principal Place of Business  
**3399 PGA BLVD., SUITE 240  
PALM BEACH GARDENS, FL 33410**

Mailing Address  
**3399 PGA BLVD., SUITE 240  
PALM BEACH GARDENS, FL 33410**

**20040605**



2. Principal Place of Business

**11360 Jug Road  
Suite, Apt. #, etc.  
Suite 200**

3. Mailing Address

**11360 Jug Road  
Suite, Apt. #, etc.  
Suite 200**

03152005 Chg-LLC CR2E083 (10/03)

City & State  
**Palm Beach Gardens, Florida**

Zip  
**33418**

Country  
**USA**

City & State  
**Palm Beach Gardens, Florida 33418**

Zip

Country

4. FEI Number  
**34-2000 218**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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, 2005**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
SING, MALCOLM S  
3399 PGA BLVD., SUITE 240  
PALM BEACH GARDENS, FL 33410** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
GALGANO, JIM  
3399 PGA BLVD., SUITE 240  
PALM BEACH GARDENS, FL 33410** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**11360 Jug Road, Suite 200  
Palm Beach Gardens, Florida 33418** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**11360 Jug Road, Suite 200  
Palm Beach Gardens, Florida 33418** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

**MJ. Malcolm S. Sing, managing member, 3/15/05, 561-691-9900**