


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90017 036 ****50.00

DOCUMENT # L04000054101 1. Entity Name ATRIUM 100 LLC	
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Principal Place of Business 631 US WHY 1 SUITE 100 N PALM BEACH, FL 33408	Mailing Address 631 US WHY 1 SUITE 100 N PALM BEACH, FL 33408
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DO NOT WRITE IN THIS SPACE



03172006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1549949

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KNEEN, JEFFREY D
1601 FORUM PLACE
SUITE 300
WEST PALM BEACH, FL 33401

**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 _____ (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	MGR TARPELL, ALAN 631 US HWY 1, SUITE 100 NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR THOMPSON, DAN 631 US HWY 1, SUITE 100 NORTH PALM BEACH, FL 33408
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**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 608, Florida Statutes.

SIGNATURE: ALAN TARPELL 4/21/06 561 840-4747

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #