

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 06, 2005 8:00 am
Secretary of State

05-23-2005 90377 029 ****50.00

DOCUMENT # L04000055284																			
1. Entity Name COUNTRY MANOR ESTATES, LLC																			
Principal Place of Business 222 LAKEVIEW AVENUE, SUITE 260 WEST PALM BEACH, FL 33401		Mailing Address 222 LAKEVIEW AVENUE, SUITE 260 WEST PALM BEACH, FL 33401																	
2. Principal Place of Business 525 SOUTH FLAGLER DRIVE SUITE 200		3. Mailing Address 525 SOUTH FLAGLER DRIVE SUITE 200																	
City & State WEST PALM BEACH, FL		City & State WEST PALM BEACH, FL																	
Zip 33401		Country USA																	
4. FEI Number 20-2613539		Applied For ☐ Not Applicable																	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		Chg-LLC CR2E083 (10/03)																	
6. Name and Address of Current Registered Agent KOEPEL, JOEL P 222 LAKEVIEW AVENUE, SUITE 200 WEST PALM BEACH, FL 33401		7. Name and Address of New Registered Agent 525 SOUTH FLAGLER DRIVE, SUITE 200																	
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.		9. Filing Fee is \$50.00 Due by May 1, 2005																	
SIGNATURE <i>[Signature]</i>		DATE 5/18/05																	
10. MANAGING MEMBERS/MANAGERS		11. ADDITIONS/CHANGES																	
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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 606, Florida Statutes.																			
SIGNATURE <i>[Signature]</i>		DATE 5/18/05																	
SIGNATURE AND TYPE-PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE LISA FAIRCLOUGH		DATE 5/18/05																	

30008951



dy
30008951
original
your Records
Bureau
does not
have
record
of it.

Check was deposited by you + paid back on 5/26/05

Make check payable to
Florida Department of State