2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000059211

1. Entity Name BOYNTON EAST, LLC



FILED Apr 07, 2008 08:00 A Secretary of State

Principal Place of Business

150 N. SWINTON AVENUE DELRAY BEACH, FL 33444

Mailing Address

150 N. SWINTON AVENUE DELRAY BEACH, FL 33444



01072008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number		Applied For
	20-1480934	[Not Applicable
5.	Certificate of Status Desired	\$5.0	Additional

Name and Address of Current Registered Agent

HASNER, RICHARD 944 GREENSWARD LANE DELRAY BEACH, FL 33445

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 The above named entity submits this statement for the purpose of chathe obligations of registered agent. 	anging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accep
SIGNATURE		•
Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	<u> </u>
FILE NOW!!! FEE IS \$138.75		04/17/08-80046-019 138.75
After May 1, 2008 Fee will be \$538.75	•	
MANAGING MEMBERS/MANAGERS		•

TITLE	MGRM				
NAME	HASNER, JAY				
STREET ADDRESS	150 N. SWINTON AVENUE				
CITY-ST-ZIP	DELRAY BEACH, FL 33444				
TITLE	MGRM				
NAME	HASNER, RICHARD				
STREET ADDRESS	150 N. SWINTON AVENUE				
CITY-ST-ZIP	DELRAY BEACH, FL 33444				
TITLE					
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NAME					
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CITY-ST-ZIP					
11. I hereby certify that the information supplied with this filling poes not qualify for the ex-					

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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 NAM

HING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #