

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED**  
**Jan 05, 2006**  
**Secretary of State**

DOCUMENT# L04000060090

**Entity Name:** SHEFFER PROPERTIES OF FT. MYERS, LLC

**Current Principal Place of Business:**

11780 U.S. HIGHWAY ONE, SUITE 300  
NORTH PALM BEACH, FL 33408

**New Principal Place of Business:**

1045 E. ATLANTIC AVE, SUITE 206  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

11780 U.S. HIGHWAY ONE, SUITE 300  
NORTH PALM BEACH, FL 33408

**New Mailing Address:**

1045 E. ATLANTIC AVE, SUITE # 206  
DELRAY BEACH, FL 33483

**FEI Number:** 20-4046971      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

HAILE, SHAW & PFAFFENBERGER, P.A.  
11780 U.S. HIGHWAY ONE, SUITE 300  
NORTH PALM BEACH, FL 33408    US

**Name and Address of New Registered Agent:**

HAILE, SHAW & PFAFFENBERGER, P.A.  
11780 U.S. HWY 1, SUITE 300  
NORTH PALM BEACH, FL 33408    US

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.

SIGNATURE: OREN TASINI

01/05/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:                    ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:                    ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title:                    CEO                    ( ) Change (X) Addition  
Name:                    SHEFFER, LOREN W CEO  
Address:                    4128 FRANCES DRIVE  
City-St-Zip:                    DELRAY BEACH, FL 33445

Title:                    SVP                    ( ) Change (X) Addition  
Name:                    FUZIA, NILA SVP  
Address:                    1045 E. ATLANTIC AVE, SUITE 206  
City-St-Zip:                    DELRAY BEACH, FL 33483

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: NILA FUIZA

SVP

01/05/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date