

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000068837

FILED
Apr 26, 2006
Secretary of State

Entity Name: CLARENDON REALTY, LLC

Current Principal Place of Business:

9621 CONCHSHELL MANOR
PLANTATION, FL 33324 US

New Principal Place of Business:

323 NORTHEAST SIXTH AVENUE
DELRAY BEACH, FL 33483 US

Current Mailing Address:

P.O. BOX 16266
PLANTATION, FL 33318 US

New Mailing Address:

323 NORTHEAST SIXTH AVENUE
DELRAY BEACH, FL 33483 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKOLNIK, ADAM I
2875 NORTHEAST 191ST STREET
304
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

ADAM I. SKOLNIK, P.A.
323 NORTHEAST SIXTH AVENUE
DELRAY BEACH, FL 33483 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: ADAM I. SKOLNIK, ESQ.

04/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SKOLNIK, ADAM I
Address: 9621 CONCHSHELL MANOR
City-St-Zip: PLANTATION, FL 33324 US

Title: MGRM () Delete
Name: SKOLNIK, CAROLE
Address: 9621 CONCHSHELL MANOR
City-St-Zip: PLANTATION, FL 33324 US

Title: MGRM () Delete
Name: SKOLNIK, LAURENCE
Address: 9621 CONCHSHELL MANOR
City-St-Zip: PLANTATION, FL 33324 US

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

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

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: SKOLNIK, ANDREW
Address: 9621 CONCHSHELL MANOR
City-St-Zip: PLANTATION, FL 33324 US

Title: MGRM () Change (X) Addition
Name: SKOLNIK, ALEXANDER
Address: 9621 CONCHSHELL MANOR
City-St-Zip: PLANTATION, FL 33324 US

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: ADAM I. SKOLNIK

MGRM

04/26/2006

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