

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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DOCUMENT # L04000075878

1. Entity Name
SPRINGS GARDEN HOLDINGS, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY 26 AM 9:46

Principal Place of Business
13790 NW 4TH STREET, SUITE 113
SUNRISE, FL 33325

Mailing Address
13790 NW 4TH STREET, SUITE 113
SUNRISE, FL 33325

DO NOT WRITE IN THIS SPACE

05012006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1862064

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZEDECK, LEONARD E ESQ
13790 NW 4TH STREET, SUITE 113
SUNRISE, FL 33325

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by September 6, 2006**

700075484187
05/31/06--01010--001 **2550.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
JACOBI, BENJAMIN R
13790 NW 4 ST, #113
SUNRISE, FL 33325

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

LEONARD E ZEDECK

Date

Daytime Phone #