

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90039 027 ****50.00

DOCUMENT # L04000082432

1. Entity Name

TOUR DEFORCE, LLC



Principal Place of Business

4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR
FORT LAUDERDALE FL 33308

Mailing Address

4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR
FORT LAUDERDALE FL 33308



2. Principal Place of Business

265 S. Federal Highway

3. Mailing Address

265 S. Federal Highway

Suite, Apt. #, etc.

143

Suite, Apt. #, etc.

143

City & State

Deerfield Beach, FL.

City & State

Deerfield Beach, FL.

Zip

33441-4161

Country

U.S.A.

Zip

33441-4161

Country

U.S.A.

1st MOORE

CR2E083 (10/05)

4. FEI Number

20-1879527

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROSENBERG, ARTHUR R

4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR
FORT LAUDERDALE FL 33308

Note: Registered Agent has not changed.
Only his address has changed.

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1499 W. Palmetto Park Rd, Suite #300

City

Boca Raton

FL

Zip Code

33486

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME WELLINGTON PROPERTIES, INC.
STREET ADDRESS 200 SE 6TH STREET, SUITE 202A
CITY-ST-ZIP FORT LAUDERDALE FL 33301

☐ Delete

10. ADDITIONS/CHANGES

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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CITY-ST-ZIP

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☐ Change ☐ Addition

11. I hereby certify that the information furnished with this filing does not qualify for the exemptions contained in Section 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:

Herman D. Sahagian, Jr.

4/22/06

(954) 415-3861

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

Date

Daytime Phone #