


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 30, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000086683.**  
 1. Entity Name  
**PARKSIDE ZENITH, LLC**



Principal Place of Business      Mailing Address  
**222 S. MILITARY TRAIL**      **222 S. MILITARY TRAIL**  
**DEERFIELD BEACH, FL 33442**      **DEERFIELD BEACH, FL 33442**

**DO NOT WRITE IN THIS SPACE**



02132006 No Chg-LLC      CR2E083 (11/05)

4. FEI Number <b>65-1057541</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**GORDON, SEYMOUR**  
**222 S. MILITARY TRAIL**  
**DEERFIELD BEACH, FL 33442**

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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 a registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, in ink or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GORDON, SEYMOUR 222 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442
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901000405359  
 04/12/06-80076-021 50.00

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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 606, Florida Statutes.

**SIGNATURE:** Seymour Gordon      Seymour Gordon      3/28/06      954-592-8211  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #