


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000086870	
1. Entity Name 8460 PECONIC BAY BOULEVARD, LLC	

Principal Place of Business 3700 SOUTH OCEAN BOULEVARD #608 HIGHLAND BEACH FL 33487 US	Mailing Address 3700 SOUTH OCEAN BOULEVARD #608 HIGHLAND BEACH FL 33487 US
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2. Principal Place of Business 3700 SOUTH OCEAN BLVD. Suite, Apt. #, etc. APT. 608 City & State HIGHLAND BEACH, FL Zip 33487 Country PALM BEACH	3. Mailing Address 3700 S. OCEAN BLVD. Suite, Apt. #, etc. APT. 608 City & State HIGHLAND BEACH, FL Zip 33487 Country PALM BEACH
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1st MOORE CR2E083 (10/05)

4. FEI Number NO-T APPLICABLE	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CERVON, LAWRENCE J 3700 SOUTH OCEAN BOULEVARD, APT. 608 HIGHLAND BEACH FL 33487	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when relocating) DATE _____

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

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CERVON, LAWRENCE J 3700 SOUTH OCEAN BOULEVARD #608 HIGHLAND BEACH FL 33487 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	1100000439359 03/01/06-80043-015 50.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied 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: Lawrence J. Cerven 2/15/06