2006 LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT # L04000091230 SIXTEEN WATERVIEW, L.L.C. Principal Place of Business Mailing Address

FILED Feb 27, 2006 08:00 AM **Secretary of State**



DO NOT WRITE IN THIS SPACE

5801 CONGRESS AVENUE

BOCA RATON, FL 33487

02222006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2031318

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additlonal Fee Required

MOMBACH, GEOFFREY S ESQ. C/O MOMBACH, BOYLE & HARDIN, P.A. 500 EAST BROWARD BLVD., SUITE 1950

6. Name and Address of Current Registered Agent

FT. LAUDERDALE, FL 33394

SIGNATURE:

5801 CONGRESS AVENUE

BOCA RATON, FL 33487

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	named entity submits this statement for the purpose of chan- ions of registered agent.	ging its registered office or registered agent, or both, in the	s State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title (Leppicable).	(ROTE: Registered Agent algranue required when rehibiting)	DATE
FI Di	ling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
HITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WOLF, STEVE 5801 CONGRESS AVENUE BOCA RATON, FL 33487		
TITLE HAME STREET ADDRESS CITY-ST-ZIP		03,	URBB08447133 108706-80042-009-58 .00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NO	OT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN TH	IS SPACE
TITLE HAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 algorithm have the same legal effect as if made under certify that I am a managing member or manager of the filmited ilability company or the repolicer or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE