

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000005922

FILED  
Feb 21, 2006  
Secretary of State

**Entity Name:** ARNOFF COMMERCIAL FUNDING, LLC

**Current Principal Place of Business:**

2090 SARNO ROAD  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

2090 SARNO ROAD  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 54-2167579

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ARNOFF, LAURA  
2090 SARNO ROAD  
MELBOURNE, FL 32935 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ARNOFF, DAVID M  
Address: 4167 MOCKINGBIRD DRIVE  
City-St-Zip: MELBOURNE, FL 32935 US

Title: MGR ( ) Delete  
Name: ARNOFF, LISA A  
Address: 4167 MOCKINGBIRD DRIVE  
City-St-Zip: MELBOURNE, FL 32935 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: BONNIE GALVIN

ACCT

02/21/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date