

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011470

Entity Name: LENNARD TRAILS, LLC.

FILED  
Mar 01, 2006  
Secretary of State

**Current Principal Place of Business:**

106 LA VIDA COURT  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

106 LA VIDA COURT  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

SOLOMON, MARC I  
2385 EXECUTIVE CENTER DRIVE  
STE # 190  
BOCA RATON, FL 33431 US

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

SOLOMON, MARC I  
1160 SOUTH ROGERS CIRCLE STE 2  
STE # 190  
BOCA RATON, FL 33487 US

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: MARC SOLOMON

03/01/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ELLIOT INVESTMENT G, ROUP, LLC  
Address: 106 LA VIDA COURT  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM ( ) Delete  
Name: PARAMOUNT EQUITIES, LLC  
Address: 25 ROUTE 22 EAST  
City-St-Zip: SPRINGFIELD, NJ 07081

**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: ELLIOT RUSOFF

MGR

03/01/2006

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