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2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
06 SEP 25 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000034347

1. Entity Name
TOWEL BROTHERS, LLC

Principal Place of Business	Mailing Address
125 SAINT EDWARDS PLACE PALM BEACH GARDENS, FL 33418	125 SAINT EDWARDS PLACE PALM BEACH GARDENS, FL 33418

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

03172006 Chg-LLC CR2E063 (11/05)

4. FEI Number 20-2636605 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEKON, FREDERIC T
5808 PGA BOULEVARD STE 211
PALM BEACH GARDENS, FL

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 _____

Filing Fee is $550.00
Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS	10. ADDITIONS / CHANGES
(M) DJG Realty, LLC ☐ Delete 125 ST Edwards Pl (MGRM) Palm Beach Gardens, FL 33418	☐ Change ☐ Addition
(M) Gary Gelman MGRM ☐ Delete 125 St Edwards Pl Palm Beach Gardens, FL 33418	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition

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 605, Florida Statutes.

SIGNATURE: _____ 3/20/06
Officer and Director Signature(s) required (Attach additional sheets if necessary) Date