

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000041354

FILED
Aug 22, 2006
Secretary of State

Entity Name: EL-CLAIR RANCH DEVELOPMENTS, LLC

Current Principal Place of Business:

4111 NORTH 42ND TERRACE
HOLLYWOOD, FL 330211827

New Principal Place of Business:

Current Mailing Address:

4111 NORTH 42ND TERRACE
HOLLYWOOD, FL 330211827

New Mailing Address:

FEI Number: 20-2777307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PRESSER, SHLOMI
110 EAST BROWARD BLVD., SUITE 1700
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

ELEFANT, REUBEN
4111 NORTH 42ND TERRACE
HOLLYWOOD, FL 33021 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: REUBEN ELEFANT

08/22/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ELEFANT, REUBEN
Address: 4111 NORTH 42ND TERRACE
City-St-Zip: HOLLYWOOD, FL 330211827

Title: MGRM () Delete
Name: EUBANK, YAFFA
Address: 10195 ALLEGRO DRIVE
City-St-Zip: BOCA RATON, FL 33428

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: REUBEN ELEFANT

MGM

08/22/2006

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