

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044809

Entity Name: PARK EAST, LLC

FILED  
May 01, 2006  
Secretary of State

## Current Principal Place of Business:

15 PARADISE PLAZA  
#255  
SARASOTA, FL 34239

## New Principal Place of Business:

2501 PORTLAND STREET  
SARASOTA, FL 34231

## Current Mailing Address:

15 PARADISE PLAZA  
#255  
SARASOTA, FL 34239

## New Mailing Address:

2501 PORTLAND STREET  
SARASOTA, FL 34231

FEI Number: FEI Number Applied For (X) 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:

W. BARTLETT SCOVILL, P.A.  
1605 MAIN STREET  
SUITE 912  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

STERN, DANIEL B  
2501 PORTLAND STREET  
SARASOTA, FL 34231 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: DANIEL STERN

05/01/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: REED, GABRIEL  
Address: 15 PARADISE PLAZA #255  
City-St-Zip: SARASOTA, FL 34239

## ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition  
Name: STERN, DANIEL B  
Address: 2501 PORTLAND STREET  
City-St-Zip: SARASOTA, FL 34231 US

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: DANIEL STERN

PRES

05/01/2006

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