

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000046158

FILED  
Apr 06, 2006  
Secretary of State

Entity Name: 209 EAST OCEAN INVESTORS, LLC

## Current Principal Place of Business:

SUITE 401, ONE LINCOLN PLACE  
1900 GLADES ROAD  
BOCA RATON, FL 33431

## New Principal Place of Business:

2401 SOUTH SEACREST BLVD  
BOYNTON BEACH, FL 33435

## Current Mailing Address:

SUITE 401, ONE LINCOLN PLACE  
1900 GLADES ROAD  
BOCA RATON, FL 33431

## New Mailing Address:

2401 SOUTH SEACREST BLVD  
BOYNTON BEACH, FL 33435

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

W. RODGERS MOORE, P.A.  
SUITE 401, ONE LINCOLN PLACE  
1900 GLADES ROAD  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

SALAM DAGHER  
2401 SOUTH SEACREST BLVD  
BOYNTON BEACH, FL 33435 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: SALAM DAGHER

04/06/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: DAGHER, SALAM  
Address: SUITE 401, 1900 GLADES ROAD  
City-St-Zip: BOCA RATON, FL 33431

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: DAGHER, SALAM  
Address: 2401 SOUTH SEACREST BLVD  
City-St-Zip: BOYNTON BEACH, FL 33435

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: SALAM DAGHER

MGR

04/06/2006

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