

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 03, 2006  
Secretary of State**

DOCUMENT# L05000052970

Entity Name: BANKIER LANDVEST, LLC

**Current Principal Place of Business:**

4800 NORTH FEDERAL HIGHWAY SUITE 200E  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

4800 NORTH FEDERAL HIGHWAY SUITE 200E  
BOCA RATON, FL 33431

**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:**

BANKIER, M. ADAM  
4800 NORTH FEDERAL HIGHWAY SUITE 200E  
BOCA RATON, FL 33431      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title:                      MGR                      ( ) Delete  
Name:                      BANKIER, M. ADAM  
Address:                      4800 NORTH FEDERAL HIGHWAY SUITE 200E  
City-St-Zip:                      BOCA RATON, FL 33431

**ADDITIONS/CHANGES:**

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: BANKIER, M. ADAM                      MGR.                      04/03/2006

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