

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000053598

FILED
Apr 30, 2006
Secretary of State

Entity Name: MOE'S LEGACY PLACE, LLC

Current Principal Place of Business:

2200 WEST GLADES ROAD, SUITE 1200-B
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2200 WEST GLADES ROAD, SUITE 1200-B
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 20-3802041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, SOUTH, MILHAUSEN & CARR, P.A.
C/O JEFFREY P. MILHAUSEN, ESQ.
2699 LEE ROAD, SUITE 120
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

HEIDGERKEN, JASON J MR.
2200 W. GLADES RD
1200-B
BOCA RATON, FL 33431 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: JASON J. HEIDGERKEN

04/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HEIDGERKEN, JASON
Address: 2200 WEST GLADES ROAD, SUITE 1200-B
City-St-Zip: BOCA RATON, FL 33431

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: NAGAO, DARRYL
Address: 2200 WEST GLADES ROAD, SUITE 1200-B
City-St-Zip: BOCA RATON, FL 33431

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: JASON HEIDGERKEN

MGR

04/30/2006

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