## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000059774

SPRECHER, DEBORAH

WESTON, FL 33332

2725 KINSINGTON CIRCLE

Name:

Address:

City-St-Zip:

Entity Name: PAR EXCELLENCE GOLF PREMIUMS II, LLC

FILED Jan 09, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	SINGTON CIR , FL 33332	CLE			
Current M	lailing Addre	ss:	New Mail	ing Address:	
	SINGTON CIR , FL 33332	CLE			
FEI Number	: 20-3054677	FEI Number Applied For ( )	FEI Number Not App	olicable ( )	Certificate of Status Desired ( )
Name and	l Address of	Current Registered Agent:	Name and	d Address of	New Registered Agent:
	ER, KEVIN SSINGTON CI , FL 33332	RCLE US			
	e named entity e of Florida.	submits this statement for the	purpose of changing	its registered	office or registered agent, or both
SIGNATU	RE:				
Electronic Signature of Registered Age			ent Date		
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	RUBENSTEIN 4840 CAMBRI	DGE DRIVE	Title: Name: Address: City-St-Zip:	RUBENSTEIN 9473 CANABR	IDGE DRIVE
Title: Name: Address: City-St-Zip:	MGRM ( TSUR, ITAL 300 WEST 55 NEW YORK, N		Title: Name: Address: City-St-Zip:	TSUR, ITAI 2783 MITCHE	
Title: Name: Address: City-St-Zip:	MGRM ( SPRECHER, I 2725 KINSING WESTON, FL	TON CIRCLE	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition
Title:	MGRM (	) Delete	Title:	(	) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ITAI TSUR MGRM 01/09/2006