

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000061871

FILED  
May 09, 2006  
Secretary of State

Entity Name: ROCKING HORSE ESTATES, LLC

## Current Principal Place of Business:

933 POMPANO DRIVE  
JUPITER, FL 33458

## New Principal Place of Business:

4227 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410

## Current Mailing Address:

933 POMPANO DRIVE  
JUPITER, FL 33458

## New Mailing Address:

4227 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410

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:

BYRD, WADE R ESQUIRE  
350 ROYAL PALM WAY, SUITE 409  
PALM BEACH, FL 33480 US

## Name and Address of New Registered Agent:

SIDES, MICHELLE L ESQ  
4227 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410 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: MICHELLE L SIDES

05/09/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MONAHAN, ED  
Address: 933 POMPANO DRIVE  
City-St-Zip: JUPITER, FL 33458

Title: MGRM (X) Delete  
Name: ARANDA, DAWN  
Address: 6650 IMPERIAL WOODS ROAD  
City-St-Zip: JUPITER, FL 33458

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ARANDA, MICHAEL F  
Address: 4227 NORTHLAKE BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: MICHAEL F ARANDA

MGRM

05/09/2006

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