

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000063766

Entity Name: OCEAN PALMS 2301, LLC.

FILED  
Apr 22, 2006  
Secretary of State

**Current Principal Place of Business:**

19321 NW 6TH STREET  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

19321 NW 6TH STREET  
PEMBROKE PINES, FL 33029

**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:**

JABBOUR, AHMED  
10255 NW 9 STREET CIRCLE, #102  
MIAMI, FL 33172 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: SAMMARIO, RONALD J  
Address: 19321 NW 6TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGR ( ) Delete  
Name: KNIPS, JAMES J  
Address: 1100 COLONY PT, APT. 404  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: MGR ( ) Delete  
Name: KNIPS, RICHARD R  
Address: 5125 HAYES STREET  
City-St-Zip: HOLLYWOOD, FL 33021

**ADDITIONS/CHANGES:**

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

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

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: RONALD SAMMARIO

PRES

04/22/2006

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