

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Mar 05, 2007 08:00 AM
Secretary of State**

DOCUMENT # L05000066759

1. Entity Name

AXELROD & SILVER REALTY HOLDINGS, LLC



Principal Place of Business

**1501 PRESIDENTIAL WAY, SUITE 15
WEST PALM BEACH, FL 33401**

Mailing Address

**1501 PRESIDENTIAL WAY, SUITE 15
WEST PALM BEACH, FL 33401**

DO NOT WRITE IN THIS SPACE



02242007No Chg-LLC

CR2E083 (11/05)

4. FEI Number

59-2015168

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**POSNER, MICHAEL J
4420 BEACON CIRCLE, SUITE 100
WEST PALM BEACH, FL 33407**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when resigning)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000654737

03/13/07 00073 012 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
AXELROD, MICHAEL J
1501 PRESIDENTIAL WAY, SUITE 15
WEST PALM BEACH, FL 33401**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
SILVER, MICHAEL S
1501 PRESIDENTIAL WAY, SUITE 15
WEST PALM BEACH, FL 33401**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-1-07

Date

561-686-2022

Daytime Phone #