

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000070225

Entity Name: CY-FI CITY, LLC

FILED
May 23, 2006
Secretary of State

Current Principal Place of Business:

1040 BAYVIEW DRIVE, #600
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

1040 BAYVIEW DRIVE, #600
FT. LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 42-1675662 FEI Number Applied For () 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:

Name and Address of New Registered Agent:

CASORIA, S M III
1040 BAYVIEW DRIVE, #600
FT. LAUDERDALE, FL 33304 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CITY COLLEGE, INC.,
Address: 1040 BAYVIEW DRIVE, #600
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: MGRM () Delete
Name: CASORIA, S M III
Address: 1040 BAYVIEW DRIVE, #600
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: MGRM () Delete
Name: FIKE, CORNELIUS M II
Address: 1040 BAYVIEW DRIVE, #600
City-St-Zip: FT. LAUDERDALE, FL 33304

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: C. M. FIKE II

DIR

05/23/2006

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