## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## Mar 28, 2006 8:00 am Secretary of State DOCUMENT # L05000073417 03-08-2006 90045 008 \*\*\*\*50.00 1. Entity Name 2003 SW 20TH CIRCLE, LLC Principal Place of Business Mailing Address 9530 TAVERNIER DRIVE BOCA RATON FL 33496 9530 TAVERNIER DRIVE **BOCA RATON FL 33496** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State Applied For City & State 4. FEI Number *20-* 32 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SINGER, BERNARD A ESQ. Street Address (P.O. Box Number is Not Acceptable) 3107 STIRLING ROAD, SUITE 105 FT. LAUDERDALE FL 33312 City Zip Code 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 Signiture, typisd or printed name or registerest agent and title d applicable (NOTE: Registered Agent signature required which reinstating) FILE NOW!!! FEE IS \$50:00 " Make Check Payable to Florida Department of State. Due By May 1, 2006 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 9. 10. TIRE MGR TITLE ☐ Detete ☐ Change ☐ Addition NAME KING, BRENT NAME STREET ADDRESS 9530 TAVERNIER DRIVE STREET ADDRESS CITY-ST-ZIP CITY - 51 - 21P BOCA RATON FL 33496 HILE ☐ Oelete ☐ Change MGR ■ Addition NAME KING, BARBARA NAME 9530 TAVERNIER DRIVE STREET ADDRESS STREET ADDRESS CITY-SI-7/P **BOCA RATON FL 33496** CITY-ST-7/P BHE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STHEET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ΠHF DILE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP DRE Detete πιε ☐ Channe ☐ Addition NAME NAME STREET AODRESS STREET ADDRESS CITY-ST-ZIP City-St-2tP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

FILED



March 9, 2006

2003 SW 20TH CIRCLE, LLC 9530 TAVERNIER DRIVE BOCA RATON, FL 33496

Subject: 2003 SW 20TH CIRCLE, LLC

Reference Number:

L05000073417

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/cj ANNUAL REPORTS SECTION