

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

03-21-2006 90294 024 ****50.00

DOCUMENT # L05000089293

1. Entity Name
TIARA REALTY OF FLORIDA, LLC



Principal Place of Business
11000 PROSPERITY FARMS ROAD
SUITE 202
PALM BEACH GARDENS, FL 33410

Mailing Address
11000 PROSPERITY FARMS ROAD
SUITE 202
PALM BEACH GARDENS, FL 33410

30004137



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

01252006 Chg-LLC CR2E083 (11/05)

4. FEI Number
142-36-3594

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
PAPARONE, THOMAS A
11000 PROSPERITY FARMS ROAD
SUITE 202
PALM BEACH GARDENS, FL 33410

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

Filing Fee is \$50.00 Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PAPARONE, THOMAS A 11000 PROSPERITY FARMS ROAD, SUITE 202 PALM BEACH GARDENS, FL 33410 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Thomas A. Paparone Thomas A. Paparone 1/25/06 (561) 622-3038

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ATTACHMENT
30004137
TIARA REALTY OF FLORIDA, LLC



April 3, 2006

Annual Report Section
Florida Department of State
2670 Executive Center Circle
Tallahassee, Florida 32301

RE: L05000089293

We are in receipt of your letter dated March 22, 2006 informing us that our Federal Employer Identification number was missing from our 2006 Annual Report.

The corrected form is enclosed, but we were told by our attorney that since this is a single member limited liability company, that an FEI number is not needed and that the social security number can be used.

Should you require any further information, I can be reached at (561) 622-3038.

Darlene LoBue
Administrative Operations