

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000090460

**FILED**  
**Mar 09, 2010**  
**Secretary of State**

**Entity Name:** BALMORAL AT DELRAY LAKE ESTATES LLC

**Current Principal Place of Business:**

2840 UNIVERSITY DR  
CORAL SPRINGS, FL 330651425

**New Principal Place of Business:**

2840 UNIVERSITY DR  
CORAL SPRINGS, FL 33065 US

**Current Mailing Address:**

2840 UNIVERSITY DR  
CORAL SPRINGS, FL 330651425

**New Mailing Address:**

2840 UNIVERSITY DR  
CORAL SPRINGS, FL 33065 US

**FEI Number:** 36-4579076

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GILLESPIE, III, REES B  
1515 SOUTH FEDERAL HWY  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

GILLESPIE, III, REES B  
7601 N FEDERAL HIGHWAY  
SUITE 165-A  
BOCA RATON, FL 33487 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:

03/09/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DAVID LEVINE  
Address: 2840 UNIVERSITY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR  
Name: MARTZ ENTERPRISES PROFIT SHARING PLAN  
Address: 2840 UNIVERSITY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby 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: DAVID LEVINE

MGR

03/09/2010

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