

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

01-23-2006 90227 033 ****50.00

DOCUMENT # L05000103486 1. Entity Name HARBORSIDE AT SANTA BARBARA, LLC					
Principal Place of Business 1937 EAST ATLANTIC BLVD STE 2 POMPANO BEACH, FL 33060			Mailing Address 1937 EAST ATLANTIC BLVD STE 2 POMPANO BEACH, FL 33060		
2. Principal Place of Business 2101 N. ANDREWS AVE Suite/Apt. #, etc. 107		3. Mailing Address 2101 N ANDREWS AVE Suite/Apt. #, etc. 107			
City & State WILTON MANORS		City & State WILTON MANORS		4. FEI Number 02-0754647	
Zip 33311		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent GROSCH, RICK 2124 NE 44 STREET FORT LAUDERDALE, FL 33308				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
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	MANAGER RICK GROSCH 2124 NE 44 ST FT LAUDERDALE FL 33308		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MANAGER HENRIK BRIXEN 929 SE 10 CT POMPANO BEACH FL 33060		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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	
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: <u>X</u> Rick Grosch					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					
Date 01/20/2006 Daytime Phone # 954-683-2000					

30001287



01192006 Chg-LLC CR2E083 (11/05)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

ATTACHMENT

30001287

January 30, 2006

HARBORSIDE AT SANTA BARBARA, LLC
2101 N ANDREWS AVE
SUITE 107
FORT LAUDERDALE, FL 33311

Subject: **HARBORSIDE AT SANTA BARBARA, LLC**

Reference Number: **L05000103486**

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

List the complete title, name, street address, city, state and zip code of each manager, managing member or principal of the limited liability company.

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.

/JE

ANNUAL REPORTS SECTION