

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000109730

**FILED**  
**Jan 15, 2006**  
**Secretary of State**

**Entity Name:** 265 HEMPSTEAD TURNPIKE ASSOCIATES, LLC

**Current Principal Place of Business:**

95 SEAMAN AVENUE  
ROCKVILLE CENTRE, NY 11570

**New Principal Place of Business:**

**Current Mailing Address:**

95 SEAMAN AVENUE  
ROCKVILLE CENTRE, NY 11570

**New Mailing Address:**

**FEI Number:** 20-3786160

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLODIG, GREGORY J  
100 W. CYPRESS CREEK ROAD STE 700  
FORT LAUDERDALE, FL 33309 US

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

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: MGR ( ) Delete  
Name: EZRA, JOEL S  
Address: 95 SEAMAN AVENUE  
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: MGR ( ) Delete  
Name: HOWE, DAVID  
Address: 95 SEAMAN AVENUE  
City-St-Zip: ROCKVILLE CENTRE, NY 11570

**ADDITIONS/CHANGES:**

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:** JOEL S EZRA

MGR

01/15/2006

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