

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000118244

Entity Name: TEN PROPERTIES, LLC

FILED
Feb 16, 2006
Secretary of State

Current Principal Place of Business:

1160 S. ROGERS CIRCLE
SUITE 2
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

1160 S. ROGERS CIRCLE
SUITE 2
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 20-3934815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLOMON, MARC I
1160 S. ROGERS CIRCLE
SUITE 2
BOCA RATON, FL 33487 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: MGRM () Delete
Name: SOLOMON, MARC I
Address: 1160 S. ROGERS CIRCLE #2
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM () Delete
Name: REIPRECHT, RAY
Address: 1160 S. ROGERS CIRCLE #2
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM () Delete
Name: JAFFY, BRETT
Address: 1160 S. ROGERS CIRCLE #2
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM () Delete
Name: JAFFY, ED
Address: 1160 S. ROGERS CIRCLE #2
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM () Delete
Name: JAFFY, GREG
Address: 1160 S. ROGERS CIRCLE #2
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM () Delete
Name: HIRSHMAN, ROBERT
Address: 1160 S. ROGERS CIRCLE #2
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

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: MARC I. SOLOMON

MGRM

02/16/2006

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