

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000007434

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** BOCA TIDE, LLC

**Current Principal Place of Business:**

408 HIBISCUS AVENUE  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

100 EAST LINTON BLVD  
400A  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 74-3025991

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FREISBERG, BOBBY  
21550 ST ANDREWS GRAND CIRCLE  
BOCA RATON, FL 33486 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  
**Name:** FREISBERG, BOBBY  
**Address:** 21550 ST ANDREWS GRAND CIRCLE  
**City-St-Zip:** BOCA RATON, FL 33486

**Title:** MGR  
**Name:** FREISBERG, GANGOLF  
**Address:** 21550 ST ANDREWS GRAND CIRCLE  
**City-St-Zip:** BOCA RATON, FL 33486

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:** BOBBY FREISBERG

MR

04/26/2010

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