## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L98000000939

Entity Name: TORCH REALTY, L.L.C.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

284 NW 46TH STREET 15639 70TH TRAIL N

BOCA RATON, FL 33431 PALM BEACH GARDENS, FL 33418

Current Mailing Address: New Mailing Address:

284 NW 46TH STREET 15639 70TH TRAIL N.

BOCA RATON, FL 33431 PALM BEACH GARDENS, FL 33418

FEI Number: 65-0851283 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SHAKERDGE, ORIN SHAKERDGE, ORIN 284 NW 46TH STREET 15639 70TH TRAIL N

BOCA RATON, FL 33431 US PALM BEACH GARDENS, FL 33418 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: 04/28/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 SHAKERDGE, ORIN
 Name:
 SHAKERDGE, ORIN

 Address:
 284 NW 46TH STREET
 Address:
 15639 70TH TRAIL N.

City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ZIETZ, DAVID
 Name:

 Address:
 1080 HOLLAND DRIVE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ZIETZ, SAM
 Name:

 Address:
 1080 HOLLAND DRIVE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33487
 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: ORIN SHAKERDGE MGRM 04/28/2006