

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L98000001419

1. Entity Name
CANTERBURY ASSOCIATES L.C.



Principal Place of Business
C/O IDM MANAGEMENT INC.
1130B HALLENDALE BEACH BLVD
HALLANDALE, FL 33009

Mailing Address
C/O IDM MANAGEMENT INC.
1130B HALLENDALE BEACH BLVD
HALLANDALE, FL 33009

FILED
Apr 26, 2005 08:00 AM
Secretary of State



01182005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0848368

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROBERTS, NORMAN T ESQ.
50 WEST MASHTA DRIVE, SUITE 2
KEY BISCAYNE, FL 33149

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
IDM MANAGEMENT INC.
1130B HALLENDALE BEACH BLVD
HALLANDALE, FL 33009

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04/26/05-80044-011 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #