


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L99000000676 1. Entity Name SOPHIE ASSOCIATES, L.C.	
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Principal Place of Business 12850 SHORE DRIVE SOUTH PALM BEACH GARDENS, FL 33410	Mailing Address 12850 SHORE DRIVE SOUTH PALM BEACH GARDENS, FL 33410
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DO NOT WRITE IN THIS SPACE



01102006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0905491	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent KENNEY, TIMOTHY H 120 BUTLER STREET, STE. B WEST PALM BEACH, FL 33407

**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.

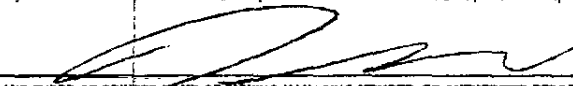
SIGNATURE _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2006	UN00000339205 01/31/06 00038-014 50.00
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9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST- ZIP	MGRM GREEN, HOWARD A. 12850 SHORE DRIVE SOUTH PALM BEACH GARDENS, FL 33410	
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11. I hereby certify that the information stipulated with this filing does not qualify for the exemptions contained in Chapter 119, 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

1/11/06 **(561) 659-1510**
Date Daytime Phone #