

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005129

FILED
Apr 21, 2006
Secretary of State

Entity Name: THE SEASONS OF FLORIDA, L.L.C.

Current Principal Place of Business:

C/O THE RICHMAN GROUP
340 PEMBERWICK ROAD
GREENWICH, CT 06831

New Principal Place of Business:

Current Mailing Address:

C/O THE RICHMAN GROUP
340 PEMBERWICK ROAD
GREENWICH, CT 06831

New Mailing Address:

FEI Number: 58-2488090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE RICHMAN GROUP OF FLORIDA, INC.
THE BRANDYWINE CENTRE I
580 VILLAGE BLVD STE. 120
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

THE RICHMAN GROUP OF FLORIDA, INC.
THE BRANDYWINE CENTRE I
580 VILLAGE BLVD STE. 360
WEST PALM BEACH, FL 33409 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: KRISTIN M MILLER, PRESIDENT

04/21/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WILDER RICHMAN CORP.,
Address: 340 PEMBERWICK ROAD
City-St-Zip: GREENWICH, CT 06831

Title: MGRM () Delete
Name: RICHELSON, ERIC
Address: 4 NEW KING STREET
City-St-Zip: WHITE PLAINS, NY 10604

ADDITIONS/CHANGES:

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: GINA K DODGE, SEC OF WILDER RICHMAN CORP

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04/21/2006

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