2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000006325

1. Entity Name MIZNER PLACE LLC

FILED Apr 20, 2006 08:00 AN **Secretary of State**

Principal Place of Business

Mailing Address

75 NE 6TH AVE

75 NE 6TH AVE

SUITE 103

SUITE 103

DELRAY BEACH, FL 33483

DELRAY BEACH, FL 33483



04122006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 22-3681246

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WEINSTEIN, NORMAN S 75 NE 6TH AVE **SUITE 103** DELRAY BEACH, FL 33483

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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, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NSW DEVELOPMENT CORP 75 NE 6TH AVE #103 DELRAY BEACH, FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SUMMIT BUILDING & DESIGN, INC. 12300 S SHORE BLVD #300 WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SUMMIT BUILDERS OF FLORIDA, INC. 4221 NE 24TH AVE LIGHTHOUSE POINT, FL 33064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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11. I hereby certify that the information supplied 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 impowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Norman S. Weinstein, Member

4/13/06

561-278-9292

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

Date

Daytime Phone #