


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90030 037 \*\*\*\*50.00

DOCUMENT # L03000042799 1. Entity Name HARBOR AUBURN HILLS MANAGEMENT, LLC	
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Principal Place of Business 1440 HIGHWAY A1A VERO BEACH, FL 32963	Mailing Address 1440 HIGHWAY A1A VERO BEACH, FL 32963
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**DO NOT WRITE IN THIS SPACE**



04072006 No Chg-LLC	CR2E083 (11/05)
4. FEI Number 20-0372295	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

F&L CORP.  
 ONE INDEPENDENT DRIVE  
 SUITE 1300  
 JACKSONVILLE, FL 32202

**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 \_\_\_\_\_ DATE \_\_\_\_\_

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

**Filing Fee is \$50.00  
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP SMICK, TIMOTHY S 1440 HIGHWAY A1A VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS SIMMONS, DANIEL L 1440 HIGHWAY A1A VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HILLS, ZACHARY A 1440 HIGHWAY A1A VERO BEACH, FL 32963
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**DO NOT WRITE IN THIS SPACE**

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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Zachary Hill \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

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