

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000005123

**FILED**  
**Apr 17, 2006**  
**Secretary of State**

**Entity Name:** SOVEREIGN HOMES, LLC

**Current Principal Place of Business:**

8900 BRIGHTON LANE  
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

9780 SILVER CREEK COURT  
ESTERO, FL 33928 US

**Current Mailing Address:**

8900 BRIGHTON LANE  
BONITA SPRINGS, FL 34135 US

**New Mailing Address:**

9780 SILVER CREEK COURT  
ESTERO, FL 33928 US

FEI Number: 20-0712472

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TRICKER, DAVID  
8900 BRIGHTON LANE  
BONITA SPRINGS, FL 34135 US

**Name and Address of New Registered Agent:**

MEYERS, D. ANTHONY JR  
9780 SILVER CREEK COURT  
ESTERO, FL 33928 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: D. ANTHONY MEYERS JR.

04/17/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MEYERS, D. ANTHONY JR  
Address: 9350 HIGHLAND WOODS BOULEVARD SUITE 4302  
City-St-Zip: BONITA SPRINGS, FL 34135 US

**ADDITIONS/CHANGES:**

Title: MGMR (X) Change ( ) Addition  
Name: MEYERS, D. ANTHONY JR  
Address: 9780 SILVER CREEK COURT  
City-St-Zip: ESTERO, FL 33928 US

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: D. ANTHONY MEYERS JR

MGMR

04/17/2006

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