


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # M05000003642

1. Entity Name
AVONLEA ANTIQUE MALL, LLC



Principal Place of Business 5900 BALCONES DRIVE, SUITE 260 AUSTIN, TX 78731	Mailing Address 5900 BALCONES DRIVE, SUITE 260 AUSTIN, TX 78731
--	--

DO NOT WRITE IN THIS SPACE



03012006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 32-0150307	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**WATSON, TODD
 7785 BAYMEADOWS WAY, SUITE 107
 JACKSONVILLE, FL 32256**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

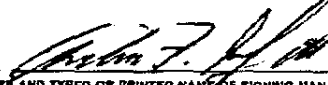
000000548604
 05/12/06-80071-012 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRAF, ARTHUR F III 5900 BALCONES DRIVE, SUITE 260 AUSTIN, TX 78731
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ORTON, JOHN R 5900 BALCONES DRIVE, SUITE 260 AUSTIN, TX 78731
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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:  **Arthur F. Graf, III** Manager 4/24/06 (512)418-0061

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #