

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90049 032 ****50.00

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04262006 Chg-LLC CR2E083 (11/05)

DOCUMENT # L00000000085 1. Entity Name BOGGY CREEK ESTATES, L.C.					
Principal Place of Business 233 S SEMORAN BLVD ORLANDO, FL 32807			Mailing Address 233 S SEMORAN BLVD ORLANDO, FL 32807		
2. Principal Place of Business 976 Lake Baldwin Lane Suite, Apt. #, etc. Suite 201		3. Mailing Address 976 Lake Baldwin Lane Suite, Apt. #, etc. Suite 201			
City & State Orlando FL		City & State Orlando FL		4. FEI Number 59-3623264	
Zip 32814		Country ORANGE		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent REY, TONY JR 233 S SEMORAN BLVD ORLANDO, FL 32807			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 976 Lake Baldwin Ln Suite 201 City Orlando FL Zip Code 32814		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM C.J.O. DEVELOPMENT COMPANY 1716 CAPE CORAL PARKWAY CAPE CORAL, FL 33904	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM REY BOGGY, INC. 233 SOUTH SEMORAN BLVD. ORLANDO, FL 32807	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 	<input type="checkbox"/> Delete			
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: Jose A Ray for Rey Boggy: 4/27/06 407-2816666 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE DAYTIME PHONE #</small>					