

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008147

Entity Name: CRAVEN-PELICAN BAY LLC

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

26381 SOUTH TAMiami TRAIL
SUITE 300
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

26381 SOUTH TAMiami TRAIL
SUITE 300
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 65-1112938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONROY, J. THOMAS III
CONROY, COLEMAN & HAZZARD, P.A.
2640 GOLDEN GATE PKWY, STE 115
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CRAVEN, RICHARD
Address: 5200 WILLSON ROAD #201
City-St-Zip: EDINA, MN 55424

Title: MGRM () Delete
Name: PELICAN BAY DEV, INC, .
Address: 26811 SOUTH BAY DRIVE SUITE 350
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CRAVEN, RICHARD
Address: 5200 WILSON ROAD #201
City-St-Zip: EDINA, MN 55424

Title: MGRM (X) Change () Addition
Name: PELICAN BAY DEV, INC, .
Address: 26381 S. TAMiami TRAIL #300
City-St-Zip: BONITA SPRINGS, FL 34134

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: JAMES A NASHMAN

MGRM

04/24/2006

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