FILED
Jul 06, 2006 8:00 am
Secretary of State
05-19-2006 90169 008 ****50.00

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000002249

1. Entity Name
COCONUT GROVE REALTY DEVELOPMENT, L.C.

Principal Place of Business
2134 PALM HARBOR BOULEVARD
STE B
PALM HARBOR, FL 34683

Mailing Address
PO BOX 612
PALM HARBOR, FL 34682

DO NOT WRITE IN THIS SPACE

05092006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
02-0570776
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CAVALARIS, MICHAEL
PO BOX 612
PALM HARBOR, FL 34683
2134 PALM HARBOR BLVD STE B
PALM HARBOR, FL 34683

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: [signature] (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when executing) DATE

Filing Fee is $50.00
Due by September 6, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	CAVALARIS, MICHAEL
STREET ADDRESS	2134 PALM HARBOR BOULEVARD STE. B
CITY-ST-ZIP	PALM HARBOR, FL 34683
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: [signature] 6/15/06 727-789-0600

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