

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010342

FILED  
Mar 14, 2006  
Secretary of State

Entity Name: ROANE AT REGATTA, LLC

**Current Principal Place of Business:**

4465 LEGENDARY DRIVE  
DESTIN, FL 32541 US

**New Principal Place of Business:**

**Current Mailing Address:**

1140 COMPASS POINTE CROSSING  
ALPHARETTA, GA 30005 US

**New Mailing Address:**

3070 WINDWARD PLAZA  
SUITE F-106  
ALPHARETTA, GA 30005 US

FEI Number: 58-2443908

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROANE, HAMPTON B MANAGER  
87 ST. FRANCIS DRIVE NORTH  
DESTIN, FL 32550 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: ROANE, HAMPTON B  
Address: 1140 COMPASS POINTE CROSSING  
City-St-Zip: ALPHARETTA, GA 30005 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ROANE, HAMPTON B  
Address: 3070 WINDWARD PLAZA, SUITE F-106  
City-St-Zip: ALPHARETTA, GA 30005 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: HAMPTON ROANE

MANA

03/14/2006

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