


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000017926 1. Entity Name 206 DUVAL, L.L.C.	
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Principal Place of Business 24 HILTON HAVEN DRIVE KEY WEST, FL 33040	Mailing Address 24 HILTON HAVEN DRIVE KEY WEST, FL 33040
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DO NOT WRITE IN THIS SPACE



04212008No Chg-LLC CR2E083 (12/07)

4. FEI Number 32-0022984	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GUTTENMACHER, EDWARD P ESQ.
2600 DOUGLAS ROAD, PENTHOUSE 8
CORAL GABLES, FL 33134

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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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

00000536861

05/27/08-80027-005 198.75

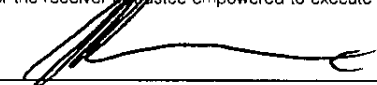
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSSI, MARK P.O. BOX 1527 KEY WEST, FL 33041
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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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date: 4/22/08
Daytime Phone #