

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000033847

1. Entity Name
PORT ORANGE APARTMENT ASSOCIATES I, L.L.C.



Principal Place of Business
**753 E. GLENN AVE.
AUBURN, AL 36831**

Mailing Address
**753 E. GLENN AVE.
AUBURN, AL 36831**



03212006No Chg-LLC

CRZE083 (11/05)

4. FEI Number
11-3668131

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BUILDER, J. LINDSAY JR
C/O GRAHAM, BUILDER, JONES, ET AL LLP
369 N. NEW YORK AVENUE, 3RD FLOOR
WINTER PARK, FL 32789**

**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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SHANNON, MICHAEL V
STREET ADDRESS	753 E. GLENN AVE.
CITY-ST-ZIP	AUBURN, AL 36831
TITLE	MGRM
NAME	BUSH, DOUGLAS C
STREET ADDRESS	4203 VINELAND RD. SUITE K-13
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100001402505
04/11/06 80077-018 50.00

**DO NOT WRITE
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 606, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/21/06
Date

334/821-0928
Daytime Phone #