## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

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

FILED Service May 01, 2006 08:00 AN DOCUMENT # L03000001386 1. Entity Name **Šecrétary of State** WARD HILL, LLC Principal Place of Business Mailing Address 110 LAUREL TREE WAY 110 LAUREL TREE WAY BRANDON, FL 33511 BRANDON, FL 33511 04272006No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 13-4230490 Not Applicable \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent HILL, WARD DO NOT WRITE 110 LAUREL TREE WAY BRANDON, FL 33511 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 this if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS MGRM TITLE HAME HILL, WARD 110 LAUREL TREE WAY STREET ADDRESS BRANDON, FL 33511 CDY-ST-ZIP TITLE U00000557962 NAME 05/17/06-80073-013 50.00 STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS CITY-ST-ZIP 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.