

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019088

FILED  
Mar 23, 2006  
Secretary of State

Entity Name: TREASURE COAST PROPERTIES LLC

## Current Principal Place of Business:

725 N A1A  
SUITE C113  
JUPITER, FL 33477

## New Principal Place of Business:

## Current Mailing Address:

725 N A1A  
SUITE C-113  
JUPITER, FL 33477

## New Mailing Address:

FEI Number: 74-3093186

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAVOLL, TRACEY  
725 N A1A  
C113  
JUPITER, FL 33458 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: MGR ( ) Delete  
Name: LAVOLL, TRACEY  
Address: 18742 BIG CYPRESS DR  
City-St-Zip: JUPITER, FL 33458

Title: MGR ( ) Delete  
Name: LAVOLL, JOSTEIN  
Address: 18742 BIG CYPRESS DR.  
City-St-Zip: JUPITER, FL 33458

Title: MGR ( ) Delete  
Name: DALY, MARK F  
Address: 18875 LOBLOLLY BAY CT.  
City-St-Zip: JUPITER, FL 33458

Title: MGRM ( ) Delete  
Name: DALY, MICHELLE C  
Address: 18875 BIG CYPRESS DR.  
City-St-Zip: JUPITER, FL 33458

Title: MGRM ( ) Delete  
Name: DALY, HENRY  
Address: 18510 LAKE BEND DR.  
City-St-Zip: JUPITER, FL 33458

Title: MGRM ( ) Delete  
Name: DALY, MARY A  
Address: 18510 LAKE BEND DR.  
City-St-Zip: JUPITER, FL 33458

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TRACEY LAVOLL

MGR

03/23/2006

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