2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019662

Address:

City-St-Zip:

Entity Name: PRIVATE QUARTERS CLUB, LLC

FILED Feb 09, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	IIGHWAY 1 SC A, FL 33469	DUTH STE. 209					
Current Mailing Address:				New Mailing Address:			
	IIGHWAY 1 SC A, FL 33469	DUTH STE. 209					
FEI Number: 20-0053945		FEI Number Applied For ()	FEI Number Not Applicable		licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
		DUTH STE. 209 US					
	named entity : e of Florida.	submits this statement for the p	urpose of	changing i	ts registered o	ffice or registered agent, or both	
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
MANAGING MEMBERS/MEMBERS:				ADDITIONS/CHANGES:			
Title: Name: Address: City-St-Zip:	DEVCON DEVE 433 SOUTH MA	Delete ELOPMENT., LLC NIN STREET, SUITE 300 DRD, CT 061101679	1	Title: Name: Address: City-St-Zip:	BELLINGER, R) Change ()Addition ICHARD P MGR WAY 1 SOUTH STE. 209 . 33469	
Title: Name: Address: City-St-Zip:	()	Delete	1	Title: Name: Address: City-St-Zip:	LABONTE, ROL	WAY 1 SOUTH STE. 209	
Title: Name: Address: City-St-Zip:	()	Delete	1	Title: Name: Address: City-St-Zip:	LABONTE, CHA	WAY 1 SOUTH STE. 209	
Title: Name: Address: City-St-Zip:		Delete	1	Title: Name: Address: City-St-Zip:	HALL, JAMES V	WAY 1 SOUTH STE. 209	
Title: Name:		Delete		Title: Name	MGR () BROWN, PETE	Change (X) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

HORSESHOE BEND PARKWAY

LAKE OZARK, MO 65049

SIGNATURE: //RICHARD P. BELLINGER// MGR 02/09/2005