2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020839

Entity Name: WATER & OAKS REAL ESTATE, LLC

FILED Jul 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

455 NORTH INDIAN ROCKS ROAD, SUITE A 490 NORTH INDIAN ROCKS ROAD, SUITE C2

BELLEAIR BLUFFS, FL 33770 BELLEAIR BLUFFS, FL 33770

Current Mailing Address: New Mailing Address:

455 NORTH INDIAN ROCKS ROAD, SUITE A 490 NORTH INDIAN ROCKS ROAD, SUITE C2

BELLEAIR BLUFFS, FL 33770 BELLEAIR BLUFFS, FL 33770

FEI Number: 54-2113173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PLATTE, DAVID E 603 INDIAN ROCKS ROAD BELLEAIR, FL 33756 US

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: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: BOWERS PLATTE, LAUREN Name: BOWERS PLATTE, LAUREN
Address: 455 NORTH INDIAN ROCKS ROAD, SUITE A Address: 490 NORTH INDIAN ROCKS ROAD, SUITE C2

City-St-Zip: BELLEAIR BLUFFS, FL 33770 City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: ARDOLINO, SHIRLEY L Name: ARDOLINO, SHIRLEY L

Address: 455 NORTH INDIAN ROCKS ROAD, SUITE A Address: 490 NORTH INDIAN ROCKS ROAD, SUITE C2

City-St-Zip: BELLEAIR BLUFFS, FL 33770 City-St-Zip: BELLEAIR BLUFFS, FL 33770

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: LAUREN BOWERS-PLATTE/MANAGER CO-OWNER MGR 07/05/2006