

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90035 021 ****50.00

40033706



04182006 Chg-LLC CR2E083 (11/05)

4. FEI Number **32-0116141** Applied For ☐ Not Applicable ☐

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

DOCUMENT # L03000022506
1. Entity Name
MAJESTIC OAKS RESORT, LLC



Principal Place of Business
**37811 CHANCEY ROAD
ZEPHYRHILLS, FL 33541**

Mailing Address
**37811 CHANCEY ROAD
ZEPHYRHILLS, FL 33541**

2. Principal Place of Business 2033 Main Street Suite, Apt. #, etc. Suite 600 City & State Sarasota, Florida Zip 34237 Country US		3. Mailing Address 2033 Main Street Suite, Apt. #, etc. Suite 600 City & State Sarasota, Florida Zip 34237 Country US	
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6. Name and Address of Current Registered Agent

**WEBB, RICHARD S IV
2033 MAIN STREET, STE 600
SARASOTA, FL 34237**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR WEBB, RICHARD S IV P.R. EST OF DONALD F WINTER SR 2033 MAIN ST 600 SARASOTA, FL 34237 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 608, Florida Statutes.

SIGNATURE: *RS Webb* AS personal rep. 4-18-06 941-366-8100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ESTATE of Donald F. Winter, Sr.

ATTACHMENT

ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, P.A.

ATTORNEYS AND COUNSELORS
2033 MAIN STREET, SUITE 600
SARASOTA, FLORIDA 34237
TELEPHONE (941) 366-8100
TOLL FREE (800) 390-3110
FACSIMILE (941) 366-6384

RICHARD S. WEBB, IV
rwebb@icardmerrill.com

REPLY TO:
P.O. BOX 4195
SARASOTA, FLORIDA 34230

20033706

April 18, 2006

Via Federal Express Saver

Florida Division of Corporations
2670 Executive Center Circle, Suite 100
Tallahassee, Florida 32301

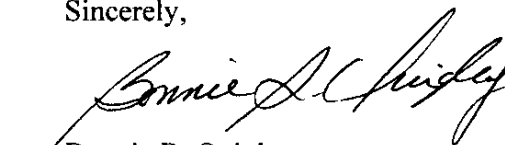
RE: **Majestic Oaks Resort, LLC**
Document #L03000022506

Dear Madam/Sir:

Enclosed herewith please find the completed 2006 Annual Report for the above-referenced entity together with a check in the amount of \$50.00 representing the renewal fee.

Should you have any questions, please do not hesitate to contact our office.

Sincerely,


Bonnie R. Quigley
Paralegal

brq

Encs.

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