# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

#### **DOCUMENT # L03000023059**

1. Entity Name

PERRY'S OCEAN EDGE RESORT, LLC



Principal Place of Business

315 N. ATLANTIC AVENUE DAYTONA BEACH, FL 32118 Mailing Address

315 N. ATLANTIC AVENUE DAYTONA BEACH, FL 32118

## **FILED** May 01, 2006 08:00 AM Secretary of State



01302006 No Chg-LLC

CR2E083 (11/05)

Applied For 4. FEI Number 20-0341999 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

#### 6. Name and Address of Current Registered Agent

GORNTO, L.A. JR.,ESQ 149 S. RIDGEWOOD AVENUE, SUITE 550 DAYTONA BEACH, FL 32114

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4-28-01

the obligations of registered agent.			
SIGNATURE_	Signature, typed or printed name of registered agent and life if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET AOORESS CITY-ST-ZIP	MGRM OCEAN EDGE HOLDINGS, LLC 315 N. ATLANTIC AVENUE DAYTONA BEACH, FL 32118	- <del></del>	U00000547129 05/12/06-80011-024 50.00 DO NOT WRITE IN THIS SPACE
THTLE NAME STREET ADDRESS CITY-ST-ZIP			
TAILE NAME STREET ADDRESS CITY-ST-DP		DO	
tifle Name Street address City-St-21P		IN	
title Name Street address City-St-Zip			
TITLE NAME STREET ACCRESS CITY-SI-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 shell have the same legal effect as if made under eath; 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.			

5. 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