

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027751

FILED  
Jul 06, 2006  
Secretary of State

Entity Name: CANNON RANCH - FLORIDA, LLC

## Current Principal Place of Business:

ATTN: LAWRENCE J. BAILIN  
401 EAST JACKSON STREET, SUITE 2200  
TAMPA, FL 33602

## New Principal Place of Business:

ATTN: LEE NEWELL  
100 PASADERA DRIVE  
MONTEREY, CA 93940

## Current Mailing Address:

ATTN: LAWRENCE J. BAILIN  
401 EAST JACKSON STREET, SUITE 2200  
TAMPA, FL 33602

## New Mailing Address:

ATTN: LEE NEWELL  
100 PASADERA DRIVE  
MONTEREY, CA 93940

FEI Number: 05-0601891      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:

BAILIN, LAWRENCE J  
401 EAST JACKSON STREET, SUITE 2200  
TAMPA, FL 33602      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: NEW CITIES LAND COMP, ANY, INC.  
Address: 100 PASADERA DRIVE  
City-St-Zip: MONTEREY, CA 93940

## ADDITIONS/CHANGES:

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: LAWRENCE J. BAILIN

RA

07/06/2006

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