## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000028125

1. Entity Name POG LLC

NAME STREET ADDRESS CITY-ST-ZIP



Principal Place of Business

28 WEST CENTRAL BLVD., SUITE 401 ORLANDO, FL 32801 US

Mailing Address

28 WEST CENTRAL BLVD., SUITE 401 ORLANDO, FL 32801 US

## FILED Apr 03, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03152006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 56-2341333 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, WARREN E 28 WEST CENTRAL BLVD., SUITE 401 ORLANDO, FL 32801

## DO NOT WRITE IN THIS SPACE

ORLANDO, FL 32801		IN THIS SPACE	
	named entity submits this statement for the purpose of cha- tions of registered agent.	Applying its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or ponted name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating) OATE	
F	iling <b>Fee is \$</b> 50.00 ue by May 1, 2006		
9. TITLE NAME STREET ADDRESS CITY -ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM ALAFAYA HOLDINGS, LTD. 28 WEST CENTRAL BLVD., SUITE 401 ORLANDO, FL 32801	U00000490615	
TITLE NAME STREET ADDRESS CHY-ST-ZIP		04/18/06-80059-025 50.00	
title Name Street Address City - St - Zip		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-S1-2IP	·		

11. I hereby certify that the information supplied with this litting 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 eath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

402-292-7717

Cayrene Phone #