2006 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L03000028135 OSPREY'S VIEW, LLC

Principal Place of Business

Mailing Address

42 SLEEPY HOLLOW ROAD MIDDLEBURG, FL 32068

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FILED Apr 25, 2006 8:00 am Secretary of State

04-25-2006 90022 023 ****50.00

***VUJJ12X**



DO NOT WRITE IN THIS SPACE

04192006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For NOT APPLICABLE Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

BLACKBURN, DENNIS L 5150 BELFORT ROAD SOUTH **BUILDING 500** JACKSONVILLE, FL 32256

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing of registered agent.	ging its registere	d office or registered agent, or both, in the Stat	e of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Ac			Agent signature required when reinstating)	DATE
·				
Fi D	iling Fee is \$50.00 ue by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ASHBY, GEORGE H JR. 42 SLEEPY HOLLOW ROAD MIDDLEBURG, FL 32068			
TITLE NAME STREET AODRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CHY-SI-ZIP			DO NOT	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,,,,		
TITLE NAME STREET ADDRESS				

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.



George H. Ashby, Jr.

4/19/06

(904) 272-9548

Daytime Phone #