


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

May 05, 2006 8:00 am
Secretary of State

04-06-2006 90301 025 ****50.00

DOCUMENT # L03000035105	
1. Entity Name ORCHID ISLAND MANOR, L.L.C.	

Principal Place of Business 1914 21ST STREET VERO BEACH, FL 32960	Mailing Address 1914 21ST STREET VERO BEACH, FL 32960
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DO NOT WRITE IN THIS SPACE



01122006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-3784431	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent	
GARRIS, CHARLES E 817 BEACH AND BLVD. VERO BEACH, FL 32963	David P Novak, Char 849 20th Str. Vero Beach FLA 32960

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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 David Novak DATE 5/3/06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LUBRANO, DIANE 1914 21ST STREET VERO BEACH, FL 32960
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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: Diane Lubrano Date 3-20-06 Daytime Phone # 772 567 6765

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