

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043261

FILED
Feb 22, 2006
Secretary of State

Entity Name: CROWN LAKE EVE CONDOMINIUMS, LLC

Current Principal Place of Business:

115 NORTH MAITLAND AVENUE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

115 NORTH MAITLAND AVENUE
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 20-1034985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, BERRY J JR, ESQ
C/O WALKER & TUDHOPE, P.A.
1053 MAITLAND CENTER COMMONS BLVD, 2ND FL
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

MURRAY, MICHAEL E
115 NORTH MAITLAND AVENUE
ALTAMONTE SPRINGS, FL 32701 US

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: MICHAEL E. MURRAY

02/22/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GOLDEN FLORIDA MANAG, EMENT, INC.
Address: 115 NORTH MAITLAND AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR (X) Delete
Name: AMON INVESTMENTS, LL, C
Address: 4205 SOUTH ATLANTIC AVENUE
City-St-Zip: DAYTONA BEACH, FL 32127

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL E. MURRAY

PRES

02/22/2006

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