2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000043307

COLONY CLUB VENTURES, LLC



FILED May 03, 2006 08:00 AM Secretary of State

Principal Place of Business

619 YORKTOWN DR. LEESBURG, FL 34748 Mailing Address 619 YORKTOWN DR. LEESBURG, FL 34748



02072006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COE, ERIC H 619 YORKTOWN DR. LEESBURG, FL 34748

DO NOT WRITE

		IN	IN THIS SPACE	
8. The above the obligat	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 ue by May 1, 2006			
9. TITLE NAME STREET ADDRESS	MANAGING MEMBERS/MANAGERS MGR COE, ERIC H 120 N BLVD E			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	LEESBURG, FL 34748		1100000561496 05/19/06-80018-001 55.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE	
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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.

SIGNATURE:

CITY-ST-ZIP

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