

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049165

Entity Name: AVATAR, LLC

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

11905 LAKE SHORE PLACE
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

11905 LAKE SHORE PLACE
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 20-0467945 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LEE, MELISSA
11905 LAKE SHORE PLACE
NORTH PALM BEACH, FL 33408 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WOOD, WILLIAM H
Address: P.O. BOX 3304
City-St-Zip: PALM BEACH, FL 33480

Title: MGR () Delete
Name: LEE, MELISSA
Address: 11905 LAKE SHORE PLACE
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEE, BRIAN K
Address: 11905 LAKE SHORE PLACE
City-St-Zip: NORTH PALM BEACH, FL 33408

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: MELISSA LEE

MGR

05/01/2006

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