2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049583

Entity Name: TOMOKA EYE PROPERTIES-ORMOND, LLC

Apr 12, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

790 DUNLAWTON AVENUE, SUITE A 345 CLYDE MORRIS BLVD., SUITE 330 PORT ORANGE, FL 32127

ORMOND BEACH, FL 32174

Current Mailing Address: New Mailing Address:

790 DUNLAWTON AVENUE, SUITE A PORT ORANGE, FL 32127

FEI Number: 20-0783524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAKOWSKI, MICHAEL 790 DUNLAWTON AVENUE, SUITE A PORT ORANGE, FL 32127

MAKOWSKI, MICHAEL 345 CLYDE MORRIS BLVD., SUITE 330 ORMOND BEACH, FL 32174

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: 04/12/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM () Delete MAKOWSKI, MICHAEL Name:

790 DUNLAWTON AVENUE, SUITE A Address:

City-St-Zip: PORT ORANGE, FL 32127

Title: MGRM () Delete Name: SPERTUS, ALAN

Address: 790 DUNLAWTON AVE. SUITE A

City-St-Zip: PORT ORANGE, FL 32127

Title: MGRM () Delete TEN HULZEN, RICHARD Name:

790 DUNLAWTON AVE., SUITE A Address: City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES:

Title: (X) Change () Addition

MAKOWSKI, MICHAEL Name:

Address: 345 CLYDE MORRIS BLVD., STE. 330

City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM (X) Change () Addition

Name: SPERTUS, ALAN

Address: 345 CLYDE MORRIS BLVD., STE, 330

City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM (X) Change () Addition

Name: TEN HULZEN, RICHARD

345 CLYDE MORRIS BLVD., STE. 330 Address:

City-St-Zip: ORMOND BEACH, FL 32174

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 K. MAKOWSKI **MGRM** 04/12/2006