

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90051 018 ****50.00

DOCUMENT # L03000052863

1. Entity Name
DAHLIA DRIVE REALTY, L.L.C.



Principal Place of Business
861 W. MORSE BLVD., SUITE 250
WINTER PARK, FL 32789

Mailing Address
861 W. MORSE BLVD., SUITE 250
WINTER PARK, FL 32789



01032006No Chg-LLC

CR2E083 (11/05)

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| | |
|--|-------------------------------|
| 4. FEI Number 01-5266335 | 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

BROWN, DON L ESQUIRE
533 VERSAILLES DR., SUITE 102
MAITLAND, FL 32751

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR MOGUL, MAX A 861 W. MORSE BLVD., SUITE 250 WINTER PARK, FL 32789 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DIR SHELDON GREENE 861 W MORSE BLVD, SUITE 250 WINTER PARK, FL 32789 |
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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: Sheldon Greene Sheldon Greene 1/2/06 407-647-5111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #