## 2006 LIMITED LIABILITY COMPANY

SIGNATURE:

## Mar 06, 2006 8:00 am ANNUAL REPORT **Secretary of State** DOCUMENT # L03000054075 02-15-2006 90135 007 \*\*\*\*50.00 1. Entity Name 1082 RIVA GLEN ROAD LLC Principal Place of Business Mailing Address 101 SANSBURY'S WAY P.O. BOX 15065 WEST PALM BEACH, FL 33416-5065 WEST PALM BEACH, FL 33411-3670 01262006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DEFREHN, JOHN A DO NOT WRITE 101 SANSBURY'S WAY WEST PALM, BEACH, FL 33411-3670 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. (NOTE: Registered Agent signeture required when remaining) DATE Filing Fee Is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS MGRM TITLE VECELLIO, LEO A JR. STREET ADDRESS 101 SANSBURY'S WAY CITY-ST-ZIP WEST PALM BEACH, FL 334113670 TITLE NAME STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE YASKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADORESS CTTY-57-ZIP 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 eath; 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.

FILED



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 17, 2006

1082 RIVA GLEN ROAD LLC P.O. BOX 15065 WEST PALM BEACH, FL 33416-5065

Subject: 1082 RIVA GLEN ROAD LLC

Reference Number:

L03000054075

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/MH ANNUAL REPORTS SECTION