

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L03000054310		
1. Entity Name SUNVEST RESORTS, LLC		
Principal Place of Business 1001 ARMSTRONG BLVD SUITE A KISSIMMEE, FL 34741		Mailing Address 1001 ARMSTRONG BLVD SUITE A KISSIMMEE, FL 34741
DO NOT WRITE IN THIS SPACE		
		 01122006No Chg-LLC CR2E083 (11/05)
		4. FEI Number 20-1717220 Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent MARK, BRIAN M 104 N. CHURCH STREET KISSIMMEE, FL 34741		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when removing)</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
DATE 02/15/06-80063-010 55.00		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR SUNVEST REALTY GROUP, INC. 1001 ARMSTRONG BLVD., SUITE A KISSIMMEE, FL 34741	
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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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		
<small>Date Daytime Phone #</small>		