

## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L04000010210

1. Entity Name
AUSTIN JOINT VENTURE, LLC



FILED Apr 14, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

1211 NORTH WESTSHORE BLVD, STE 700 TAMPA, FL 33607 1211 NORTH WESTSHORE BLVD, STE 700 TAMPA, FL 33607



DO NOT WRITE IN THIS SPACE

04062006No Chg-LLC CR2E083 (11/05)

4. FEI Number 77-0623129

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

AUSTIN, ALFRED S 1211 N WESTSHORE BLVD, STE 700 TAMPA, FL 33607

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<ol><li>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 the obligations of registered agent.</li></ol>	. I am familiar with, and accept

(NOTE: Registered Agent signature required when reinstating)

Filing Fee & \$50.00 Due by May 1, 2006

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## 9. MANAGING MEMBERS/MANAGERS MGR TITLE AUSTIN, ALFRED S NAME STREET ADDRESS 1211 NO. WESTSHORE BLVD., SUITE 700 CITY-ST-ZIP TAMPA, FL 33607 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

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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 fiability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04/06/06

813-289-3886

Daytime Phone