2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000010687

114 A PALM POINT CIR

PALM BEACH GARDENS, FL 33418

Address:

City-St-Zip:

Entity Name: COVERED BRIDGE ESTATES, LLC

FILED Aug 10, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
C/O MICH 114A PAL	HAEL A. GREAN M POINT CIR ACH GARDENS, FL 33418	·		
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
114A PAL	IAEL A. GREAN M POINT CIR ACH GARDENS, FL 33418			
FEI Number	r: FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the limited liability co	FEI Number Not Applicable (X) company did not receive the prior notice	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent:	Name and Address of	of New Registered Agent:	
11845 165	N, THOMAS L STH. RD. N. FL 33478 US			
	e named entity submits this statement for the e of Florida.	purpose of changing its registere	d office or registered agent, or both	
SIGNATU	RE:			
	Electronic Signature of Registered A	gent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () Delete GREAN, MICHAEL A 114 A PALM POINT CIR PALM BEACH GARDENS, FL 33418	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGR () Delete JACKSON, THOMAS L MGR	Title: Name:	() Change () Addition	

Address:

City-St-Zip:

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 A. GREAN MGR 08/10/2006