

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017245

FILED
Feb 14, 2005
Secretary of State

Entity Name: FISHERMAN'S HARBOUR VILLAGE, LLC

Current Principal Place of Business:

C/O LVK DEVELOPMENT, LLC
102 JAMES POND COURT
DEBARY, FL 32713

New Principal Place of Business:

C/O LVK DEVELOPMENT, LLC
2574 S. VOLUSIA AVENUE
ORANGE CITY, FL 32763

Current Mailing Address:

C/O LVK DEVELOPMENT, LLC
102 JAMES POND COURT
DEBARY, FL 32713

New Mailing Address:

C/O LVK DEVELOPMENT, LLC
2574 S. VOLUSIA AVENUE
ORANGE CITY, FL 32763

FEI Number: 20-0820565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WANAMAKER, JOHN CCIM
102 JAMES POND COURT
DEBARY, FL 32713 US

Name and Address of New Registered Agent:

WANAMAKER, JOHN CCIM
2574 S. VOLUSIA AVENUE
ORANGE CITY, FL 32763 US

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.

SIGNATURE:

02/14/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: FIRST COMMERCIAL DEV, ELOPMENT, LLC
Address: 102 JAMES POND COURT
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FIRST COMMERCIAL DEV, ELOPMENT, LLC
Address: 2574 S. VOLUSIA AVENUE
City-St-Zip: ORANGE CITY, FL 32763

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN WANAMAKER

MGR

02/14/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date