2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 15, 2006 8:00 am Secretary of State

DOCUMENT # L04000024112 1. Entity Name EDEN PROPERTIES, LLC						~	02-15-2006 9	-		00	
Principal Place	e of Business	Mailing Address		<u> </u>							
176 ADAMS WAY		176 ADAMS WAY									
SANTA ROSA BEACH, FL 32459		SANTA KOSA BEACH, I	SANTA ROSA BEACH, FL 32459								
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2. Principal Place of Business		3. Mailing Address	3. Mailing Address				I ONI JIJIN ERIN OJIN AJ		1 23 1 (118) (121) (13		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			02132006	Chg-LLC	CR2E	083 (11/05)		
City & State		City & State	City & State			4. FEI Numbe	ſ		Ap	plied For	
						59-3400	3540			t Applicable	
Zip	Country	Zip	Zip Country			5. Certificate	of Status Desired		\$5.00 Add Fee Required		
	6. Name and Address of Curre	nt Registered Agent				7. Name and	Address of New	Registered			
AULI DENICE V				- Name							
AULL, DENISE K 310 CASA GRANDE LANE			Street Address ((P.O. Box Number is Not Acceptable)					
SANTA RO	OSA BEACH, FL 32459										
				City	City FL Zip Code						
8 The above	named entity submits this statement	for the purpose of changing its	s register	ed office or	registere	ed agent or bot	n in the State of F		familiar with	and accept	
	ions of registered agent.	to the purpose of ortaliging to	o rogiotori	00000	rog.o.or	o agont, or bot	1, 11 210 0440 07	ionaca y ann		Z 2007p.	
SIGNATURE.	Signature, typed or printed name of registered age	out and this if a microbia (NC)	TE: Banatara	d Appert expess				DATE		<u> </u>	
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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: DELICIO DE PRINTED NAME OF SIGNING MANAGING MENGER, MANAGER, OR AUTHORIZED REPRESENTATIVE DATE DATE PROTES PRO