2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000024471

Entity Name

THE REMINGTON AT PONTE VEDRA, LLC



FILED
May 01, 2006 08:00 Al
Secretary of State

Principal Place of Business

100 ATLANTA TECHNOLOGY CENTER 1575 NORTHSIDE DRIVE, SUITE 200 ATLANTA, GA 30318 Mailing Address

100 ATLANTA TECHNOLOGY CENTER 1575 NORTHSIDE DRIVE, SUITE 200 ATLANTA, GA 30318



04182006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1063044 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BUSS, ADAM SMITH, GAMBRELL & RUSSELL, LLP 50 N. LAURA STREET, SUITE 2600 JACKSONVILLE, FL 32202

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 In 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			
	Signature, typed or printed name of registered agent and title it applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR	The state of the s	
NAME	LECRAW SUNCOAST INVESTORS, LLC		
STREET ADDRESS	1575 NORTHSIDE DR NW, 100 ATC, STE 2000		
CITY-ST-ZIP	ATLANTA, GA 30318		
TITLE			
NAME			
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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #