

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028700

FILED  
Apr 24, 2006  
Secretary of State

**Entity Name:** PHOENIX HOMES & DESIGN LLC

**Current Principal Place of Business:**

1821 COMMODORE POINT DRIVE  
ORANGE PARK, FL 32003

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8778  
FLEMING ISLAND, FL 32006

**New Mailing Address:**

**FEI Number:** 20-1007767

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GILCHRIST, LESLIE B  
1821 COMMODORE POINT DR.  
ORANGE PARK, FL 32003 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GILCHRIST, LESLIE B  
Address: 1821 COMMODORE POINT DR.  
City-St-Zip: ORANGE PARK, FL 32003

Title: MGRM ( ) Delete  
Name: GILCHRIST, STEPHEN A  
Address: 1821 COMMODORE POINT DRIVE  
City-St-Zip: ORANGE PARK, FL 32003

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
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: LESLIE B. GILCHRIST

MGRM

04/24/2006

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