
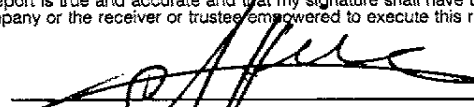


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000037924</b>		
1. Entity Name PHOENICIA CLERMONT I, LLC		
Principal Place of Business 7932 W SAND LAKE RD SUITE 300 ORLANDO, FL 32819	Mailing Address 7932 W SAND LAKE RD SUITE 300 ORLANDO, FL 32819	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  HARB, A. TOM C/O PHOENICIA DEVELOPMENT, LLC 7932 SAND LAKE RD, SUITE 300 ORLANDO, FL 32819		<b>DO NOT WRITE IN THIS SPACE</b>
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2007		01232007No Chg-LLC CR2E083 (11/05) 4. FEI Number 20-1173552 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required DATE 02/01/07-80029-013 50.00
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARBCO DEVELOPMENT, LLC 7932 W SAND LAKE RD, SUITE 300 ORLANDO, FL 32819	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JEBAILLEY, RAQUEL 7932 W SAND LAKE RD, SUITE 300 ORLANDO, FL 32819	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JEBAILLEY, CECIL 7932 W SAND LAKE RD, SUITE 300 ORLANDO, FL 32819	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JEBAILLEY, PAUL 7932 W SAND LAKE RD, SUITE 300 ORLANDO, FL 32819	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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:  1/23/07 407-226-8888 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		