

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90142 034 ****50.00

DOCUMENT # L04000038577					
1. Entity Name GREATER HILLS COMMERCIAL, LLC					
Principal Place of Business 215 N. EOLA DRIVE ORLANDO, FL 32801			Mailing Address 215 N. EOLA DRIVE ORLANDO, FL 32801		
2. Principal Place of Business		3. Mailing Address 1033 STATE ROAD 436			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 121			
City & State		City & State CASSELBERRY FL		4. FEI Number NOT APPLICABLE	
Zip		Country		Zip 32707 Country SEMINOLE	
6. Name and Address of Current Registered Agent LOWNDES, JOHN F 215 N. EOLA DRIVE ORLANDO, FL 32801				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREATER PROPERTIES, INC 1105 KENSINGTON PARK DRIVE ALTAMONTE SPRINGS, FL 32714		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
GREATER PROPERTIES, INC., a Florida corporation					
SIGNATURE: _____					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					
Date 1/27/06 Daytime Phone # 407-331-8290					
CHARLES W. GREGG, PRESIDENT					

ATTACHMENT

20008339
#LO4 000038577

LOWNDES
DROSDICK
DOSTER
KANTOR &
REED, P.A.

Attorneys at Law

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GAIL S. ANDRÉ
PARALEGAL, CORPORATE DEPARTMENT
North Eola Drive Office
Direct Dial: (407) 418-6203
E-mail: gail.andre@lowndes-law.com

February 10, 2006

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

7005 1820 0603 0102 1343

Division of Corporations
P.O. Box 6478
Tallahassee, Florida 32314

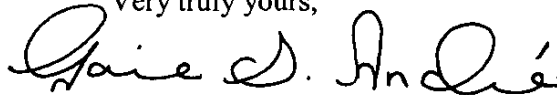
**Re: 2006 Limited Liability Company
Greater Hills Commercial, LLC**

Dear Sir or Madam:

Enclosed herewith for filing please find an executed 2006 Limited Liability Company Annual Report for Greater Hills Commercial, LLC, together with our client's check number 2082 payable to the Florida Department of State in the amount of \$50.00 representing the filing fee.

Thank you for your assistance in this matter.

Very truly yours,



Gail S. André
Corporate Paralegal to
William A. Beckett

GSA
Enclosures
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