

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000041715

1. Entity Name

DIVCO-WATERFRONT HOMES, LLC



Principal Place of Business

6628 WILLOW PARK DRIVE
NAPLES FL 34109

Mailing Address

6628 WILLOW PARK DRIVE
NAPLES FL 34109

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

26-0089550

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILSON, GARY
PORTER, WRIGHT, MORRIS & ARTHUR
5801 PELICAN BAY BLVD., SUITE 300
NAPLES FL 34108

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

10.

ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
KAUFFMAN, STEPHEN L
6628 WILLOW POND DR
NAPLES FL 34109 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
1100000461773 ☐ Change ☐ Addition
03/21/06-80008-022 50.00

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

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CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Stephen Kauffman 02-18 592-7222