## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L04000041993

1. Entity Name

MONTE VINA PROPERTIES COMPANY #1 LLC



FILED Feb 01, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

3510 SE 18 PLACE

CAPE CORAL, FL 33904 US

3510 SE 18 PLACE CAPE CORAL, FL 33904 U

## DO NOT WRITE IN THIS SPACE

01092006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1236151 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FAUNCE, LETICIA 3510 SE 18 PLACE CAPE CORAL, FL 33904

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

CAPE CO.	NAL, J.C. 33504	in in	THIS SPACE
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 reinstating)	DATE
F	iling Fee is \$50.00 ue by May 1, 2006		11000001414696 02/11/06-80048-002 50.00
9.	MANAGING MEMBERS/MANAGERS		THE RESIDENCE OF THE PROPERTY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FAUNCE, WESLEY H III 3510 SE 18 PLACE CAPE CORAL, FL 33904		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FAUNCE, LETICIA S 3510 SE 18 PLACE CAPE CORAL, FL 33904		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS			

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 eath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Wesley H. FanceTT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG MANAGING NEMBER OR AUTHORIZED REPRESENTATIVE Date

16 06 772-5577

Daytime Phone #