2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # L04000042396

1. Entity Name
REVER PROPERTIES L.L.C.

Principal Place of Business	Mailing Address
12 SOUTH DIXIE HWY. STE. 203 LAKE WORTH, FL 33460	12 SOUTH DIXIE HWY. STE. 203 LAKE WORTH, FL 33460

DO NOT WRITE IN THIS SPACE

03312006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
51-0517289
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

WENZEL, JOAN
12 SOUTH DIXIE HWY. STE. 203
LAKE WORTH, FL 33460

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

U00000500297
04/25/06-80015-014 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	WENZEL, JOAN E
STREET ADDRESS	12 SOUTH DIXIE HWY. STE. 203
CITY-ST-ZIP	LAKE WORTH, FL 33460
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ Date _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE