2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 26, 2006 08:00 AN Secretary of State DOCUMENT # L04000044135 1. Entity Name SCHOONER BAY COTTAGE, LLC Mailing Address Principal Place of Business 42 SCHOONER BAY ROAD 42 SCHOONER BAY ROAD TAVERNIER FL 33070 TAVERNIER, FL 33070 04182006No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 74-3124529 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent GLASS, GREGORY W DO NOT WRITE 127 VENETIAN WAY IN THIS SPACE ISLAMORADA, FL 33036 5. 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 about and title if applicable (NOTE Registered Agent signature required when relistating) DATE Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS D. Title SCHOONER BAY ESTATES, LLC NAME 42 SCHOONER BAY ROAD STREET ADORESS U00000533514 05/06/06-80126-005_50.00 CITY-ST-ZIP TAVERNIER, FL 33070 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS DO NOT WRITE CMY-ST-ZIP DIVE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-S1-ZP THE NAME

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statulies. I further certify that the information indicated on this report is frue 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

TAY L. WELTHEIMER.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP