

ANNUAL REPORT

FILED  
Jan 29, 2007 08:00 AM  
Secretary of State

DOCUMENT # L04000054275

1. Entity Name  
TOWN CENTER AT ST. JOHNS, LLC



Principal Place of Business  
925 N. COURTENAY PARKWAY  
SUITE 28  
MERRITT ISLAND, FL 32953

Mailing Address  
925 N. COURTENAY PARKWAY  
SUITE 28  
MERRITT ISLAND, FL 32953



01162007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
20-1452687 Applied For  
Not Applicable

5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NOHRR, PHILIP F ESQ.  
1800 W. HIBISCUS BLVD.  
SUITE 138  
MELBOURNE, FL 32901

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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, 2007

U00000607944  
01/31/07-80058-014 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BANANA RIVER, INC
STREET ADDRESS	925 N. COURTENAY PARKWAY, STE 28
CITY-ST-ZIP	MERRITT ISLAND, FL 32953
TITLE	P
NAME	KODS, MAURICE
STREET ADDRESS	925 N. COURTENAY PARKWAY, STE 28
CITY-ST-ZIP	MERRITT ISLAND, FL 32953
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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: Robert Kods 1/16/07 321-452-0888  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #