

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057366

FILED
May 01, 2006
Secretary of State

Entity Name: VILLANOVA INVESTMENT ONE, LLC

Current Principal Place of Business:

199 TUMBLIN KLING RD
FT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

199 TUMBLIN KLING RD
FT PIERCE, FL 34982

New Mailing Address:

FEI Number: 14-3400178 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

VILLANOVA, RAYMOND R
199 TUMBLIN KLING RD
FT PIERCE, FL 34982 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VILLANOVA, RAYMOND R
Address: 199 TUMBLIN KLING RD
City-St-Zip: FT PIERCE, FL 34982

Title: MGR () Delete
Name: ROMINE, TINA MARIE
Address: 2459 DANBURY ST
City-St-Zip: CHARLOTTE, NC 28211

Title: MGR () Delete
Name: ROMINE, RICHARD
Address: 2459 DANBURY ST
City-St-Zip: CHARLOTTE, NC 28211

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RAYMOND R. VILLANOVA

M

05/01/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date