


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000057792 1. Entity Name HILLS OF LAKE MARY MANAGEMENT COMPANY, LLC.	
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Principal Place of Business 411 WEST CENTRAL PARKWAY ALTAMONTE SPRINGS, FL 32714 US	Mailing Address 411 WEST CENTRAL PARKWAY ALTAMONTE SPRINGS, FL 32714 US
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DO NOT WRITE IN THIS SPACE



01092006No Chg-LLC CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent WILLIAM G. ROY, ATTORNEY AT LAW 411 WEST CENTRAL PARKWAY ALTAMONTE SPRINGS, FL 32714
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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** _____

**Filing Fee is \$50.00
Due by May 1, 2006**

U00000384910
01/17/06-80034-015 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DIAMONDBACK LAND COMPANY, INC. 411 WEST CENTRAL PARKWAY ALTAMONTE SPRINGS, FL 32714
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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: W. G. Roy 1/9/06 407-829-6167
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #