## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L04000058955** NEW TOWN PROPERTIES, LLC

Principal Place of Business

1607 EAST SILVER STAR ROAD OCOEE, FL 34761 US

Mailing Address

1607 EAST SILVER STAR ROAD OCOEE, FL 34761 US

## **FILED** Mar 06, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03012008 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1480543 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRISON, STEVEN

## DO NOT WRITE

1607 EAS' OCOEE, F	T SILVER STAR ROAD L 34761		THIS SPACE	
	named entity submits this statement for the purpose of cha- tions of registered agent.	inging its registered office or registered agent, or t	ooth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed neme of registered agent and title it applicable.	(NOTE, Registered Agent signature required when reinstating)		
FI	iling Fee is \$50.00 ue by May 1, 2006		<del>000000456308</del> 03/16/06-80024-012 50.00	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARRISON, STEVEN 1607 EAST SILVER STAR ROAD OCOEE, FL 34761		<u></u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CHY-ST-ZIP			DO NOT WRITE IN THIS SPACE	
TITLE NAME SIREET ADDRESS CITY-ST-ZIP		IN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE		1		

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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

NAME STREET ADDRESS CITY-ST-ZIP

RINTED HAME OF SIGHING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE