

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060856

FILED
Apr 19, 2006
Secretary of State

Entity Name: LDSV PROPERTY MANAGEMENT, LLC

Current Principal Place of Business:

1017 DIPLOMAT DRIVE
SUITE 102
DEBARY, FL 32713

New Principal Place of Business:

Current Mailing Address:

1017 DIPLOMAT DRIVE
DEBARY, FL 32713

New Mailing Address:

FEI Number: 20-1721481

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, WILLIAM H
1017 DIPLOMAT DRIVE
DEBARY, FL 32713 US

Name and Address of New Registered Agent:

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: JONES, WILLIAM H
Address: 1017 DIPLOMAT DRIVE
City-St-Zip: DEBARY, FL 32713

Title: MGRM () Delete
Name: SHINSKY, LAURA
Address: 1017 DIPLOMAT DRIVE
City-St-Zip: DEBARY, FL 32713

Title: MGRM () Delete
Name: ROESHINK, DEBRA L
Address: 1017 DIPLOMAT DRIVE
City-St-Zip: DEBARY, FL 32713

Title: MGRM () Delete
Name: JONES, SANDRA L
Address: 1017 DIPLOMAT DRIVE
City-St-Zip: DEBARY, FL 32713

Title: MGRM () Delete
Name: ROESHINK, VINCENT J
Address: 1017 DIPLOMAT DRIVE
City-St-Zip: DEBARY, FL 32713

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:

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: WILLIAM H. JONES

MGRM

04/19/2006

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