

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062409

**FILED**  
**Apr 23, 2006**  
**Secretary of State**

**Entity Name:** BEL AIRE AT WINDWARD, LLC

**Current Principal Place of Business:**

141 POND CYPRESS ROAD  
VENICE, FL 34292

**New Principal Place of Business:**

**Current Mailing Address:**

141 POND CYPRESS ROAD  
VENICE, FL 34292

**New Mailing Address:**

**FEI Number:** 20-1565998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARTENSTINE, J. MICHAEL  
200 SOUTH ORAGE AVE.  
SARASOTA, FL 34236 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: MGR ( ) Delete  
Name: SCHROEDERS, DAVID J  
Address: 6530 WILD ORCHID LANE  
City-St-Zip: SARASOTA, FL 34241

**ADDITIONS/CHANGES:**

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: DAVID SCHROEDERS

MGR

04/23/2006

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