15

2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000066553

1. Entity Name

AUSTIN JOINT VENTURE TWO, LLC

Principal Place of Business	Mailing Address
1211 NORTH WESTSHORE BOULEVARD, SUITE 700 .TAMPA, FL 33607	1211 NORTH WESTSHORE BOULEVARD, SUITE 700 TAMPA, FL 33607

DO NOT WRITE IN THIS SPACE

03292007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
84-1657938	Not Applicable

5. Certificate of Status Desired ☐	**$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

AUSTIN, ALFRED S
1211 NORTH WESTSHORE BOULEVARD, SUITE 700
TAMPA, FL 33607

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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, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	AUSTIN, ALFRED S
STREET ADDRESS	1211 NO. WESTSHORE BLVD, SUITE 700
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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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: _Ronald J Ellett_ RONALD L. ELLETT 3/20/07   813 289 3886

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #