

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071864

FILED  
Jan 09, 2006  
Secretary of State

**Entity Name:** CHOICE PROPERTIES RECOVERY GROUP, LLC

**Current Principal Place of Business:**

6305 WESTWOOD BLVD  
2ND FLOOR  
ORLANDO, FL 32821

**New Principal Place of Business:**

**Current Mailing Address:**

6305 WESTWOOD BLVD  
2ND FLOOR  
ORLANDO, FL 32821

**New Mailing Address:**

**FEI Number:** 01-0833912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEBER, KELLY M  
1631 THOROUGHBRED DRIVE  
GOTHA, FL 34734 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: WEBER, KELLY M  
Address: 1631 THOROUGHBRED DRIVE  
City-St-Zip: GOTHA, FL 34734

Title: MGR (X) Delete  
Name: SHAH, VARSMA  
Address: 9931 KILGORE ROAD  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES:**

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: KELLY M. WEBER

MGR

01/09/2006

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