

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90053 005 ****50.00

DOCUMENT # L04000078800

1. Entity Name
TRITON HOMES, LLC



Principal Place of Business
**717 EAST OAK STREET
KISSIMMEE, FL 34744 US**

Mailing Address
**717 EAST OAK STREET
KISSIMMEE, FL 34744 US**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

City & State
Zip Country

03302006 Chg-LLC CR2E083 (11/05)

4. FEI Number
20-1811182

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SWART, HARRY J
717 EAST OAK STREET
KISSIMMEE, FL 34744**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME BONIFACE, DARREN
STREET ADDRESS 2 BRANFORD LANE
CITY-ST-ZIP HILTON HEAD, SC 29926

TITLE MGRM ☐ Delete
NAME BRAGG, DAVID
STREET ADDRESS 23 PELICAN STREET
CITY-ST-ZIP HILTON HEAD ISLAND, SC 29926

TITLE MGRM ☐ Delete
NAME FRENCH, CALVIN L
STREET ADDRESS PO BOX 5886
CITY-ST-ZIP HILTON HEAD ISLAND, SC 29938

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME MGRM
STREET ADDRESS Eric C. Magin
CITY-ST-ZIP 251 Fort Howell Road
Hilton Head, SC 29926

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-15-06 **843-689-2811**

Date Daytime Phone #