

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

APPROVED  
AND  
FILED

06 APR 27 PM 4: 21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L04000091280

1. Entity Name  
VICTORIA PARK APARTMENTS, LLC



Principal Place of Business      Mailing Address

2455 E. SUNRISE BOULEVARD STE AR1      2455 E. SUNRISE BOULEVARD STE AR1  
FORT LAUDERDALE, FL 33304      FORT LAUDERDALE, FL 33304

**DO NOT WRITE IN THIS SPACE**



04192006 No Chg-LLC      CR2E083 (11/05)

4. FEI Number 20-2590192	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

SANTOLLA, STEVEN  
2455 E. SUNRISE BOULEVARD STE AR1  
FORT LAUDERDALE, FL 33304

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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, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SANTOLLA, STEVEN 2455 E. SUNRISE BOULEVARD STE AR1 FORT LAUDERDALE, FL 33304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LIHAN, THOMAS 8211 W BROWARD BOULEVARD STE 120 PLANTATION, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

600072458186  
04/23/06--01002--008 \*\*25.00

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2/21/06 01047/011 25.00

4/27

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: Steven Santolla      4-18-06      Date

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