## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000005807

Entity Name: PUNTA GORDA INVESTORS AT BOCA LAGO LAKE, LLC

FILED Jun 29, 2006 Secretary of State

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
	PLUS IVERSITY DRIVE, STE. C ION, FL 33324			
Current Mailing Address:		New Maili	New Mailing Address:	
	PLUS IVERSITY DRIVE, STE. C ION, FL 33324			
	: FEI Number Applied For (X) FE ce with s. 607.193(2)(b), F.S., the limited liability company I Address of Current Registered Agent:			
FRANSON 150 S. UN PLANTATI	I, PAUL IVERSITY DRIVE, STE. C ION, FL 33324 US			
	named entity submits this statement for the purpo e of Florida.	se of changing i	ts registered office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered Agent		Date	
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/	CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete FRANSON, PAUL 150 S. UNIVERSITY DRIVE, SUITE C PLANTATION, FL 33324	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete GIROUX, ANNE 10400 TAFT STREET PEMBROKE PINES, FL 33026	Title: Name: Address: City-St-Zip:	MGRM (X) Change ( ) Addition GIROUX, ANNE 4201 POLK STREET HOLLYWOOD, FL 33021	
Title: Name: Address: City-St-Zip:	MGRM () Delete COLSON, ARTHUR 11351 NW 23RD ST. PLANTATION, FL 33323	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete COLSON, DEBBIE 11351 NW 23RD ST. PLANTATION, FL 33323	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete FRAUSON, LISA 11351 NW 23RD ST. PLANTATION, FL 33323	Title: Name: Address: City-St-Zip:	MGRM (X) Change ( ) Addition FRANSON, LISA 11351 NW 23RD ST. PLANTATION, FL 33323	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	MGRM ( ) Change (X) Addition GIROUX, ROBERT 4201 POLK STREET HOLLYWOOD, FL 33021	

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: PAUL FRANSON P 06/29/2006