2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000006982

Address:

City-St-Zip:

Entity Name: VILLA DEL MAR OF VILANO BEACH, LLC

FILED Jan 09, 2006 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | | |
|---|----------------|-----------------------------|---|---|-----|
| 831 CHICOPIT JACKSONVILLE | | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 831 CHICOPIT JACKSONVILLE | | | | | |
| FEI Number: 20-23 | 376311 FEI | Number Applied For() | FEI Number Not App | Dicable () Certificate of Status Desired () | |
| Name and Add | ress of Currer | t Registered Agent: | Name and | d Address of New Registered Agent: | |
| BRANT,ABRAH 50 NORTH LAL STE 2750 JACKSONVILLE | JRA STREET | CCORMICK & GREENE S | P | | |
| The above nam in the State of F | | ts this statement for the p | ourpose of changing i | its registered office or registered agent, or bo |)th |
| SIGNATURE: | | | | | |
| _ | Electronic Sig | nature of Registered Age | ent | Date | |
| MANAGING MEMBERS/MANAGERS: | | | ADDITIONS/CHANGES: | | |
| Title: Name: Address: City-St-Zip: | ()Delete | | Title: Name: Address: City-St-Zip: | MR. () Change (X) Addition ALONSO, LEO 831 CHICOPIT LANE JACKSONVILLE, FL 32256 | |
| Title: Name: Address: City-St-Zip: | () Delete | | Title: Name: Address: City-St-Zip: | MR. () Change (X) Addition TILLER, BRYCE 917 1ST STREET N #804 JACKSONVILLE BEACH, FL 32250 | |
| Title: Name: Address: City-St-Zip: | () Delete | | Title: Name: Address: City-St-Zip: | MR. () Change (X) Addition DELACRUZ, RICHARD A 4070 COASTAL HWY ST. AUGUSTINE, FL 32084 | |
| Title: Name: | () Delete | | Title: Name: | MR. () Change (X) Addition THOMAS. ROBERT | |

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.

Address:

4070 COASTAL HWY City-St-Zip: ST. AUGUSTINE, FL 32084

SIGNATURE: BRYCE TILLER 01/09/2006