2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000006982

City-St-Zip:

Entity Name: VILLA DEL MAR OF VILANO BEACH, LLC

FILED Jul 22, 2008 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
	OPIT LANE IVILLE, FL 32225			
Current M	lailing Address:	New Maili	ng Address:	
	OPIT LANE IVILLE, FL 32225			
In accordan	: 20-2376311 FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the limited liability comp I Address of Current Registered Agent:	-		
50 NORTH STE 2750 JACKSON	BRAHAM,REITER,MCCORMICK & GREENE, F H LAURA STREET IVILLE, FL 32202 US			
	e named entity submits this statement for the pu e of Florida.	rpose of changing i	ts registered office or registered agent, or botl	
SIGNATU				
	Electronic Signature of Registered Agen	t	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/0	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MR. () Delete ALONSO, LEO 831 CHICOPIT LANE JACKSONVILLE, FL 32256	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MR. () Delete TILLER, BRYCE 917 1ST STREET N #804 JACKSONVILLE BEACH, FL 32250	Title: Name: Address: City-St-Zip:	MR. (X) Change () Addition TILLER, BRYCE 7609 WEXFORD CLUB DR E JACKSONVILLE, FL 32256	
Title: Name: Address: City-St-Zip:	MR. () Delete DELACRUZ, RICHARD A 4070 COASTAL HWY ST. AUGUSTINE, FL 32084	Title: Name: Address: City-St-Zip:	MR. (X) Change () Addition DELACRUZ, RICHARD A 969 LAKE ASBURY DRIVE GREEN COVE SPRINGS, FL 32043	
Title: Name: Address: City-St-Zip:	MR. () Delete THOMAS, ROBERT 4070 COASTAL HWY ST. AUGUSTINE, FL 32084	Title: Name: Address: City-St-Zip:	MR. (X) Change () Addition THOMAS, ROBERT 328 ST. JOHNS GOLF DRIVE ST. AUGUSTINE, FL 32092	
Title: Name: Address:	() Delete	Title: Name: Address:	MR. () Change (X) Addition JENKINS, JACK 4775 GODWIN AVE	

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

JACKSONVILLE, FL 32210

SIGNATURE: BRYCE TILLER VP 07/22/2008