2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2006
Secretary of State

DOCUMENT# L05000007376

Entity Name: LOT 27 BETTY STREET, LLC

Current Principal Place of Business:

4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 6944
DESTIN, FL 32550 US

New Mailing Address:

FEI Number: 20-2226105 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAW OFFICES OF LAMAR A. CONERLY, P.A.
4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MCGRATH, JAMES E JR.
Address: 1125 17TH STREET, SUITE 1420
City-St-Zip: DENVER, CO 80202 US

Title: MGRM ( ) Delete
Name: ANDERSON, JOHN M
Address: 1125 17TH STREET, SUITE 1420
City-St-Zip: DENVER, CO 80202 US

Title: MGRM ( ) Delete
Name: ROOKS, MIKEL J
Address: 1125 17TH STREET, SUITE 1420
City-St-Zip: DENVER, CO 80202 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MIKEL J ROOKS MR. 04/14/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date