

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016820

FILED  
Jul 03, 2006  
Secretary of State

Entity Name: TOP CHOICE PROPERTIES L.L.C.

## Current Principal Place of Business:

1106 MOSAIC DRIVE  
CLEBRATION, FL 34747

## New Principal Place of Business:

1106 MOSAIC DRIVE  
CELEBRATION, FL 34747

## Current Mailing Address:

1106 MOSAIC DRIVE  
CLEBRATION, FL 34747

## New Mailing Address:

1106 MOSAIC DRIVE  
CELEBRATION, FL 34747

FEI Number: 26-6833240      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

MANCITO, THERESA M  
1106 MOSAIC DRIVE  
CLEBRATION, FL 34747      US

## Name and Address of New Registered Agent:

MANCITO, THERESA M  
1106 MOSAIC DRIVE  
CELEBRATION, FL 34747      US

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: THERESA M. MANCITO

07/03/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM      ( ) Delete  
Name: MANCITO, THERESA M  
Address: 1106 MOSAIC DRIVE  
City-St-Zip: CLEBRATION, FL 34747

## ADDITIONS/CHANGES:

Title: MGRM      (X) Change      ( ) Addition  
Name: MANCITO, THERESA M  
Address: 1106 MOSAIC DRIVE  
City-St-Zip: CELEBRATION, FL 34747

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: THERESA M. MANCITO

MGRM

07/03/2006

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