

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2006 8:00 am
Secretary of State

04-11-2006 90014 003 ****55.00

DOCUMENT # L05000023231					
1. Entity Name NEW ADVENTURE REALTY, LLC					
Principal Place of Business 25161 RIDGE OAK DRIVE BONITA SPRINGS, FL 43134			Mailing Address 25161 RIDGE OAK DRIVE BONITA SPRINGS, FL 43134		
2. Principal Place of Business 35220 GALASHIELDS CIRCLE		3. Mailing Address 35220 GALASHIELDS CIRCLE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State BONITA SPRINGS, FL		City & State BONITA SPRINGS, FL		4. FEI Number 03222006 Chg-LLC CR2E083 (11/05)	
Zip 34134		Country U.S.A.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent DIMITROFF, NICK J 25161 RIDGE OAK DRIVE BONITA SPRINGS, FL 43134			7. Name and Address of New Registered Agent Name: <u>RICHARD E. WOOLBERT</u> Street Address (P.O. Box Number is Not Acceptable): 25220 GALASHIELDS CIRCLE City: <u>BONITA SPRINGS</u> <u>FL</u> Zip Code: <u>34134</u>		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Richard E. Woolbert</u> <u>RICHARD E. WOOLBERT</u> <u>3/30/2006</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP			MGRM NICK J. DIMITROFF 25161 RIDGE OAK DR. BONITA SPRINGS, FL. 34134		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			MGRM RICHARD E. WOOLBERT 25220 GALASHIELDS CIRCLE BONITA SPRINGS, FL. 34134		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			MGR PATRICIA S. DIMITROFF 25161 RIDGE OAK DRIVE BONITA SPRINGS, FL. 34134		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			MGR SALLY H. WOOLBERT 25220 GALASHIELDS CIRCLE BONITA SPRINGS, FL. 34134		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.					
SIGNATURE: <u>Richard E. Woolbert</u> <u>RICHARD E. WOOLBERT</u> <u>3/30/06</u> <u>(239) 495-4579</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					