


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 19, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000023695**

1. Entity Name  
 SH NOVA ROAD, LLC



Principal Place of Business  
 444 SEABREEZE BLVD.  
 SUITE 900  
 DAYTONA BEACH, FL 32118

Mailing Address  
 444 SEABREEZE BLVD.  
 SUITE 900  
 DAYTONA BEACH, FL 32118

**DO NOT WRITE IN THIS SPACE**



01152007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2286273	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HOOD, CHARLES D JR.  
 444 SEABREEZE BLVD., SUITE 900  
 DAYTONA BEACH, FL 32118

**DO NOT WRITE IN THIS SPACE**

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:  DATE: 1/19/07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

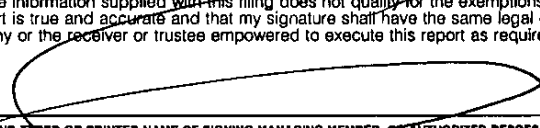
**Filing Fee is \$50.00**  
**Due by May 1, 2007**

U00000533029  
 01/22/07-80015-018 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOD, CHARLES D 444 SEABREEZE BLVD., SUITE 900 DAYTONA BEACH, FL 32118
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**DO NOT WRITE IN THIS SPACE**

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 608, Florida Statutes.

SIGNATURE:  DATE: 1/19/07 DAYTIME PHONE #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE