## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILLU DOCUMENT # L05000025156 SECRETARY OF STATE DIVISION OF CORPORATIONS WILLIAMS ROAD LAND HOLDINGS, LLC 06 AUG 10 AM 9: 58 Principal Place of Business Mailing Address 27320 HICKORY BLVD. 27320 HICKORY BLVD. BONITA SPRINGS, FL 34134-8407 BONITA SPRINGS, FL 34134-8407 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07142006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FEFNumber Applied For 06-1742358 EIN Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GEORGE, DANIEL L Street Address (P.O. Box Number is Not Acceptable) 27320 HICKORY BLVD. BONITA SPRINGS, FL 34134-8407 City Zip Code 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 Filing Fee is \$50.00 Due by September 6, 2006 Make check payable to Florida Department of State ADDITIONS/CHANGES 9. MANAGING MEMBERS/MANAGERS 10. MAUAGELA PROSIDENT TITLE Delete TITLE ☐ Change ☐ Addition DANIEL L. GERGE 27320 HICKORY BLUD NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3413Y CITY-ST-ZIP MILE MLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 06-90067-006-CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP Addition TITLE Delete TETLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

CICNATURE

Wariel Beory

7/19/2006