## **2006 LIMITED LIABILITY COMPANY**

## **ANNUAL REPORT** DOCUMENT #1 05000026773



## **FILED** Jul 10, 2006 8:00 am Secretary of State

1. Entity Name VOLK REAL PROPERTY HOLDINGS, LLC					07-10-2006	90104	034 ****5	0.00
Principal Place of Business 1001 VIA FORMIA PUNTA GORDA, FL 33950	Mailing Address 1001 VIA FORMIA PUNTA GORDA, FL 339			~~~~~1				
Principal Place of Business     3. Mailing Address								
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		07052006	Chg-LLC	CR2E	083 (11/05)	
City & State	City & State	City & State		4. FEI Numbe	28057	17	100	olied For Applicable
Zip Country	Zip	Zip Country		1	of Status Desired		\$5.00 Addi Fee Required	
Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent					
		Nar	Name					
FILEMAN, GARY T 1107 WEST MARION AVENUE, SUITE 112 PUNTA GORDA, FL 33950		Stre	reet Address (P.O. Box Number is Not Acceptable)					
1 5 ( 11 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5								
		City	/			FI	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. 1 am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered	agent and title if applicable. (NOT	E: Registered Agent	signature required	d when reinstating)		DATE		
Filing Fee is \$50.00 Due by September 6, 2006								
Filing Fee is \$50.00 Due by September 6, 2006	X						payable to nent of State	
. Oh	MBERS/MANAGERS	10.				Departi	payable to nent of State	, , , , , , , , , , , , , , , , , , , ,
9. MANAGING ME	☐ Deigte	10.			, Florida	Departi	payable to nent of State	Addition
9. MANAGING ME	☐ Deigte				, Florida	Departi	payable to ment of State	
9. MANAGING ME TITLE MARAM NAME Edward G. Vo STREET ADDRESS 1991 Via 1997	□ Deide LIC Mià	TITLE NAME STREET ADD			, Florida	Departi	payable to ment of State	
9. MANAGING ME TITLE MGRM  NAME STREET ADDRESS CITY-ST-ZIP  Ponta Gordan	□ Delete LK MIÀ FL 33950	TITLE NAME STREET ADDI CITY-ST-ZIF			, Florida	Departi	payable to ment of State S Change	Addition
9. MANAGING ME TITLE MGRM  STREET ADDRESS CITY-ST-ZIP  TITLE MGRM  MGRM	□ Delete  LIC  MIÀ  EL 33950  □ Delete	TITLE NAME STREET ADD			, Florida	Departi	payable to ment of State	
9. MANAGING ME TITLE MGRM  STREET ADDRESS CITY-ST-ZIP  TITLE MGRM  NAME RITA J. VOL  STREET ADDRESS STREET ADDRESS COLY VICE FOLM  STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	LK mia FL 33950 Delete	TITLE NAME STREET ADD CITY-ST-ZIF	,		, Florida	Departi	payable to ment of State S Change	Addition
9. MANAGING ME TITLE MGRM EDWARD G. VO STREET ADDRESS 1001 Via 1000 CITY-ST-ZIP Ponta Garda, TITLE MGRM NAME RITA J. VOL	LK mia FL 33950 Delete	TITLE NAME STREET ADDI CITY-ST-ZIF TITLE NAME	RESS		, Florida	Departi	payable to ment of State S Change	Addition
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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 608, Florida Statutes.