## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000028657

Entity Name: VILLAGGIO AT SEMORAN, LLC

6532 THE LANDING DR.

ORLANDO, FL 32812 US

Address:

City-St-Zip:

FILED Apr 06, 2006 Secretary of State

| Current Principal Place of Business:        |   |                                  | New Principal Place of Business:            |  |
|---|---|----------------------------------|---|--|
| 5950 LAKI<br>STE 169                        | EHURST DR   |                                  |   |  |
|   | D, FL 32819   | US                               |   |  |
| Current M                                   | lailing Addres  | ss:                              | New Mailing Address:                        |  |
| 5950 LAKE<br>STE 169                        | EHURST DR   |                                  |   |  |
|   | D, FL 32819   | US                               |   |  |
| FEI Number                                  | :   | FEI Number Applied For ( )       | FEI Number Not Applicable (X)               | Certificate of Status Desired ( )      |
| Name and                                    | Address of (  | Current Registered Agent:        | Name and Address                            | of New Registered Agent:               |
|   | ATTI, A B<br>IT IVES BLVD<br>), FL 32819              | US                               |   |  |
|   | named entity<br>e of Florida.                         | submits this statement for the p | ourpose of changing its registere           | ed office or registered agent, or both |
| SIGNATU                                     | RE:   |                                  |   |  |
|   | Electro   | nic Signature of Registered Age  | ent   | Date                                   |
| MANAGING MEMBERS/MANAGERS:                  |   |                                  | ADDITIONS/CHANGES:                          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | MGR (<br>PORTIGLIATTI<br>6131 SAINT IV<br>ORLANDO, FL | ES BLVD                          | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                |
| Title:<br>Name:                             | MGR (<br>PRIETO, MARI                                 | ) Delete<br>O                    | Title:<br>Name:                             | ( ) Change ( ) Addition                |

Address:

City-St-Zip:

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: ANTHONY B. PORTIGLIATTI MGR 04/06/2006