2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# L05000033189

Entity Name: TEAM VILLAGE REALTY, LLC

Current Principal Place of Business:

475 COMMERCE LAKE DRIVE, STE. 108
ST. AUGUSTINE, FL 32092

New Principal Place of Business:

200 EAST TOWN PLACE, SUITE 117
ST. AUGUSTINE, FL 32095

Current Mailing Address:

475 COMMERCE LAKE DRIVE, STE. 108
ST. AUGUSTINE, FL 32092

New Mailing Address:

200 EAST TOWN PLACE, SUITE 117
ST. AUGUSTINE, FL 32095

FEI Number: 20-2732696 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BOGGS, E. JACKSON
501 EAST KENNEDY BLVD., STE. 1700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	NESSMITH, DIANA	
Address:	475 COMMERCE LAKE DRIVE, SUITE 108	
City-St-Zip:	ST AUGUSTINE, FL 32092	
Title:	MGRM	( ) Delete
Name:	REIFF, LYNN	
Address:	475 COMMERCE LAKE DRIVE, SUITE 108	
City-St-Zip:	ST AUGUSTINE, FL 32092	
Title:	MGRM	( ) Delete
Name:	KORB, SUSAN P	
Address:	475 COMMERCE LAKE DRIVE, STE. 108	
City-St-Zip:	ST. AUGUSTINE, FL 32092	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
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: LYNN REIFF MGRM 05/01/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date