
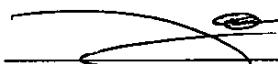


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 16, 2007 8:00 am**  
**Secretary of State**

04-16-2007 90338 002 \*\*\*\*50.00

<b>DOCUMENT # L05000037465</b> 1. Entity Name <b>RESERVE AT HOWEY IN THE HILLS, LLC</b>					
Principal Place of Business <b>232 S. DILLARD STREET, SUITE 201 WINTER GARDEN, FL 34787</b>			Mailing Address <b>PO BOX 770609 WINTER GARDEN, FL 34777</b>		
2. Principal Place of Business - No P.O. Box # <b>132 W. Plant St.</b>		3. Mailing Address Suite, Apt. #, etc. <b>Suite 200</b>			
City & State <b>Winter Garden FL</b>		City & State <b>Winter Garden FL</b>		4. FEI Number <b>20-4777999</b>	
Zip <b>34787</b>		Country <b>U.S</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>PRATT, JAMES R ESQ 369 N. NEW YORK AVENUE, 3RD FLOOR WINTER PARK, FL 32789</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>			<b>Make check payable to Florida Department of State</b>		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JUNE, ROHLAND A II 232 S. DILLARD STREET, SUITE 201 WINTER GARDEN, FL 34787	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOLSTON, ROBERT W JR 232 S. DILLARD STREET, SUITE 201 WINTER GARDEN, FL 34787	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JUNE, ROHLAND A II 232 S. DILLARD STREET, SUITE 201 WINTER GARDEN, FL 34787	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOLSTON, ROBERT W JR 232 S. DILLARD STREET, SUITE 201 WINTER GARDEN, FL 34787	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOLSTON, ROBERT W JR 232 S. DILLARD STREET, SUITE 201 WINTER GARDEN, FL 34787	<input type="checkbox"/> Delete			
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.					
<b>SIGNATURE:</b>  <b>Rohland A June</b> <b>4-10-07</b> <b>407-905-8180</b>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					