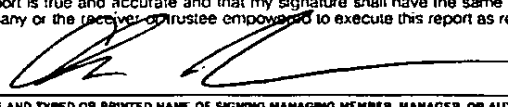


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 06, 2006 8:00 am
Secretary of State

02-17-2006 90020 026 ****50.00

DOCUMENT # L05000069666 1. Entity Name 11TH & 5TH, LLC					
Principal Place of Business 2038 BEACH AVE ATLANTIC BEACH FL 32233			Mailing Address 2038 BEACH AVE ATLANTIC BEACH FL 32233		
2. Principal Place of Business 910 11th Avenue S.		3. Mailing Address 910 11th Avenue S.		 1st MOORE CR2E083 (10/05)	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Jacksonville Beach, FL		City & State Jacksonville Beach, FL			
Zip 32250		Country USA		4. FEI Number 59-3602400	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent LAMBERTSON, CHRISTOPHER 2038 BEACH AVE ATLANTIC BEACH FL 32233				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when renewing)	
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006					
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE MGR ☐ Delete NAME ELITE HOMES, INC. STREET ADDRESS 2038 BEACH AVE CITY-ST-ZIP ATLANTIC BEACH FL 32233				TITLE Mgr. ☒ Change ☐ Addition NAME Elite Homes, Inc. STREET ADDRESS 910 11th Ave S. CITY-ST-ZIP Jacksonville Beach, FL 32250	
CITY-ST-ZIP 32250 ☐ Delete				CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE ☐ Delete				TITLE ☐ Change ☐ Addition	
NAME ☐ Delete				NAME ☐ Change ☐ Addition	
STREET ADDRESS ☐ Delete				STREET ADDRESS ☐ Change ☐ Addition	
CITY-ST-ZIP ☐ Delete				CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE ☐ Delete				TITLE ☐ Change ☐ Addition	
NAME ☐ Delete				NAME ☐ Change ☐ Addition	
STREET ADDRESS ☐ Delete				STREET ADDRESS ☐ Change ☐ Addition	
CITY-ST-ZIP ☐ Delete				CITY-ST-ZIP ☐ Change ☐ Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.					
SIGNATURE: 				Date 1-24-06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					