2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED May 30, 2008 08:00 AN Secretary of State **DOCUMENT # L05000077445** 1. Entity Name PARK CENTER CONDOS, LLC Principal Place of Business Mailing Address 8066 MONIER WAY **8066 MONIER WAY** ORLANDO, FL 32835 ORLANDO, FL 32835 US 05272008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 54-2181576 Not Applicable \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent NOWELL, JOHN DO NOT WRITE 8066 MONIER WAY ORLANDO, FL 32835 IN THIS SPACE 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE 18 \$138.75 In accordance with s. 607.193(2)(b), F.S., the limited Due by September 12, 2008 liability company did not receive the prior notice. 9. MANAGING MEMBERS/MANAGERS MGRM TITLE NOWELL, JOHN NAME STREET ADDRESS 8066 MONIER WAY CITY-ST-ZIP ORLANDO, FL 32835 U00000952714 06/04/08-80091-019 138.75 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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.

JOHN NOWELL 5-27-08 ED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

407 625 7502

Daytime Phone #