

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 24, 2006 8:00 am
Secretary of State

02-06-2006 90174 027 ****55.00

02-24-2006 90246 017 ****50.00

DOCUMENT # L05000077801			
1. Entity Name PORT ORANGE MARINA, LLC			
Principal Place of Business 201 WEST CANTON AVE., SUITE B WINTER PARK, FL 32789		Mailing Address P.O. BOX 190 WINTER PARK, FL 32790	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MILLER, SOUTH, MILHAUSEN & CARR, P.A. C/O RICHARD D. BAXTER, ESQ. 2699 LEE ROAD, SUITE 120 WINTER PARK, FL 32789		Name: Miller, South & Milhausen, P.A. NICHOLSON Street Address (P.O. Box Number is Not Acceptable): C/O Richard D. Baxter, Esq. 201 CANTON AVE. 1000 Legion Place, Suite 1200 WINTER PARK City: Orlando FL Zip Code: 32801 32789	
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: <i>[Signature]</i>		DATE: <i>1/24/06</i>	
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE: MGR NAME: THOLLANDER, ROBERT STREET ADDRESS: 201 WEST CANTON AVE., SUITE B CITY-ST-ZIP: WINTER PARK, FL 32789	☐ Delete	TITLE: MGR NAME: O'SHAUGHNESSEY, THOMAS MICHAEL STREET ADDRESS: 201 WEST CANTON AVE., SUITE B CITY-ST-ZIP: WINTER PARK, FL 32789	☐ Change ☒ Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	☐ Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	☐ Change ☐ Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	☐ Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	☐ Change ☐ Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	☐ Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	☐ Change ☐ Addition
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TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	☐ Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	☐ Change ☐ Addition
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.			
SIGNATURE: <i>[Signature]</i>		Date: <i>1-26-06</i> <i>407-628-4430</i>	

40010359



01122006 Chg-LLC CR2E083 (11/05)

4. FEI Number
20-3296133

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

(u)
0-2699 LEE ROAD, SUITE 120, WINTER PARK, FL 32789

ATTACHMENT



REAL ESTATE BROKERS

20010359
#L05000077801

NEW
Resident
AGENT

"B"