


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

04-16-2007 90337 042 ****55.00

DOCUMENT # L05000079599

1. Entity Name
COURTNEY TRACE, LLC



Principal Place of Business Mailing Address

100 COLONIAL CENTER PARKWAY, SUITE 470 100 COLONIAL CENTER PARKWAY, SUITE 470
 LAKE MARY, FL 32746 LAKE MARY, FL 32746

60036483



DO NOT WRITE IN THIS SPACE

01262007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3446518	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION COMPANY OF ORLANDO
 300 SOUTH ORANGE AVE., SUITE 1000 (DTO)
 ORLANDO, FL 32801

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SCHAFFER, JOHN 100 COLONIAL CENTER PKWY, STE 470 LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mgr Courtney Trace Development Co. Same as above
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *John Schaffer* 3/7/07 (407) 333-0066

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING/MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #