2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 20, 2006 8:00 am
Secretary of State
05-05-2006 90033 047 ****50.00

DOCUMENT # L05000081471

1. Entity Name
DEVAULT PROPERTIES OF STUART, LLC

30010814

Principal Place of Business	Mailing Address
816 EAST OCEAN BLVD. STUART, FL 34994	816 EAST OCEAN BLVD. STUART, FL 34994

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04242006 Chg-LLC CR2E083 (11/05)

4. FEI Number 215-50-6990 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DEVAULT, WALTER D III 816 EAST OCEAN BLVFD. STUART, FL 34994	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 ______________________
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, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEVAULT, WALTER D III 816 EAST OCEAN BLVD. STUART, FL 34994	☐ 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: WALTER D DeVault, III MGRM 04-24-06 772-286-5551
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

ATTACHMENT
300108 14

COTTAGE ACCOUNTING, INC
1811 PALM CITY RD; #A-502
STUART, FLORIDA 34994
TELEPHONE #772-288-0303
FACSIMILE #772-223-4005
Email enaid0303@aol.com

June 15, 2006

Florida Department of State
Division of Corporations
P O Box 6478
Tallahassee, FL 32314

Subject: DeVault Properties of Stuart, LLC
Reference #: L05000081471

Gentlemen:

As per your letter of May 10, 2006, I have completed Box 4 (FEI Number) on the enclosed form.

This is the Social Security Number of Walter D DeVault, III, the MGRM. DeVault Properties of Stuart, LLC is a single member LLC and is, therefore, considered a disregarded entity and the transactions are, therefore, reported on the owner's (Walter D DeVault, III) 1040 Schedule C. Therefore, there is no separate FEIN.

Hopefully this clears and closes the matter.

Sincerely,

Diane G Kozuch

Diane G Kozuch
Accountant for
DeVault Properties of Stuart, LLC

Enclosure