

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083915

FILED
Feb 26, 2006
Secretary of State

Entity Name: ORANGE THORPE INVESTMENTS, LLC

Current Principal Place of Business:

1682 ORANGE THORPE LANE
CLERMONT, FL 34711

New Principal Place of Business:

1682 ORANGETHORPE LANE
CLERMONT, FL 34711

Current Mailing Address:

1682 ORANGE THORPE LANE
CLERMONT, FL 34711

New Mailing Address:

1682 ORANGETHORPE LANE
CLERMONT, FL 34711

FEI Number: 20-3539590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARBARINO, PATRICIA A
1682 ORANGE THORPE LANE
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

BARBARINO, PATRICIA A
1682 ORANGETHORPE LANE
CLERMONT, FL 34711 US

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.

SIGNATURE:

02/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARBARINO, PATRICIA A
Address: 1682 ORANGE THORPE LANE
City-St-Zip: CLERMONT, FL 34711

Title: MGR () Delete
Name: LAURIA, LYNETTE L
Address: 1682 ORANGE THORPE LANE
City-St-Zip: CLERMONT, FL 34711

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BARBARINO, PATRICIA A
Address: 1682 ORANGETHORPE LANE
City-St-Zip: CLERMONT, FL 34711 US

Title: MGRM (X) Change () Addition
Name: LAURIA, LYNETTE L
Address: 1632 ORANGETHORPE LANE
City-St-Zip: CLERMONT, FL 34711 US

Title: MGR () Change (X) Addition
Name: BARBARINO, JAMES P
Address: 1682 ORANGETHORPE LANE
City-St-Zip: CLERMONT, FL 34711 US

Title: MGR () Change (X) Addition
Name: LAURIA, ROBERT J
Address: 1632 ORANGETHORPE LANE
City-St-Zip: CLERMONT, FL 34711 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ROBERT LAURIA

MGR

02/26/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date