

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000084194

FILED  
Mar 07, 2006  
Secretary of State

Entity Name: CHOCTAWHATCHEE RIVER RANCH, LLC

**Current Principal Place of Business:**

1323 SE 3RD AVENUE  
FORT LAUDERDALE, FL 33316 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 292037  
DAVIE, FL 33329

**New Mailing Address:**

FEI Number: 20-3551559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FORMAN, CHARLES R  
1323 SE 3RD AVENUE  
FORT LAUDERDALE, FL 33316 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FORMAN, WALTER H  
Address: 28 SHADY LANE  
City-St-Zip: TEQUESTA, FL 33469

Title: MGR ( ) Delete  
Name: FORMAN, HAMILTON C JR.  
Address: 1323 SE 3RD AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGR ( ) Delete  
Name: FORMAN, MILES A  
Address: 888 SE 3RD AVENUE, SUITE 501  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGR ( ) Delete  
Name: FORMAN, ERIC  
Address: 11211 PROSPERITY FARMS ROAD, SUITE B201  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGR ( ) Delete  
Name: FORMAN, CHARLES R  
Address: 1323 SE 3RD AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33316

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ERIC D FORMAN

MGR

03/07/2006

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