

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000084877

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: PRESTIGE HOMES OF SEBRING, LLC

**Current Principal Place of Business:**

4139 SUN N' LAKE BLVD.  
SEBRING, FL 33872

**New Principal Place of Business:**

**Current Mailing Address:**

4139 SUN N' LAKE BLVD.  
SEBRING, FL 33872

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SEVERINO, DARRYLIN D  
4139 SUN N' LAKE BLVD.  
SEBRING, FL 33872 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: SEVERINO, DARRYLIN D  
Address: 4139 SUN N' LAKE BLVD.  
City-St-Zip: SEBRING, FL 33872

Title: MGR ( ) Delete  
Name: TERRICO, MARILYN G  
Address: 4877 LAKE CECILE DR.  
City-St-Zip: KISSIMMEE, FL 34746

Title: MGR ( ) Delete  
Name: BUONCERVELLO, BECKY  
Address: 215 CELEBRATION PLACE #190  
City-St-Zip: CELEBRATION, FL 34747

**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:

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: DARRYLIN D SEVERINO

MGRM

04/29/2006

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