2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2006
Secretary of State

DOCUMENT# L05000095472

Entity Name: SNUG HARBOR VILLAGE, LLC

Current Principal Place of Business:

3632 W CYPRESS STREET
TAMPA, FL 33607 US

New Principal Place of Business:

5509 W GRAY STREET
SUITE 201
TAMPA, FL 33609 US

Current Mailing Address:

3632 W CYPRESS STREET
TAMPA, FL 33607 US

New Mailing Address:

5509 W GRAY STREET
SUITE 201
TAMPA, FL 33609 US

FEI Number: 20-3647595 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EAST, CLARK D
3632 W CYPRESS STREET
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

EAST, CLARK D MGR
5509 W GRAY STREET
SUITE 201
TAMPA, FL 33609 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: CLARK D EAST 01/18/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: EAST, CLARK D
Address: 3632 W CYPRESS STREET
City-St-Zip: TAMPA, FL 33607 US

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

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: EAST, CLARK D MGR
Address: 5509 W GRAY STREET SUITE 201
City-St-Zip: TAMPA, FL 33609 US

Title: MGR ( ) Change (X) Addition
Name: WHITE, MICHAEL A MGR
Address: 5509 W GRAY STREET SUITE 201
City-St-Zip: TAMPA, FL 33609 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: CLARK D EAST MGR 01/18/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date