

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000114280

Entity Name: SPLASH REALTY, LLC

FILED
Feb 07, 2006
Secretary of State

Current Principal Place of Business:

30 SOUTH SHORE DR
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

30 SOUTH SHORE DR
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

FEI Number: 20-4096888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAUCK, RYAN M
30 SOUTH SHORE DR
MIRAMAR BEACH, FL 32550 US

Name and Address of New Registered Agent:

ROBERSON, SUSAN L
30 SOUTH SHORE DR
MIRAMAR BEACH, FL 32550 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: SUSAN L ROBERSON

02/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ROBERSON, SUSAN L
Address: 30 SOUTH SHORE DR
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: MGR () Delete
Name: BROADHEAD, PAUL E JR
Address: 30 SOUTH SHORE DR
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: MGRM (X) Delete
Name: MAUCK, RYAN M
Address: 30 SOUTH SHORE DR
City-St-Zip: MIRAMAR BEACH, FL 32550 US

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: SUSAN L ROBERSON

MGR

02/07/2006

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