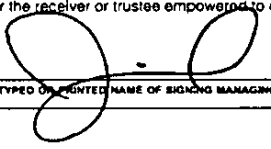


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

04-20-2006 90030 015 ****50.00

DOCUMENT # L05000122408					
1. Entity Name LAKE NONA MYRTLE CREEK, LLC					
Principal Place of Business 9801 LAKE NONA ROAD ORLANDO, FL 32827			Mailing Address 9801 LAKE NONA ROAD ORLANDO, FL 32827		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2117458	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. 420 SOUTH ORANGE AVE. SUITE 1200 ORLANDO, FL 32801-4904			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when removing) Signature, typed or printed name of registered agent and title if applicable DATE					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition		
		MGRM Lake Nona Property Holdings LLC 9801 Lake Nona Road Orlando, FL 32827			
		P Zboril, Jim 9801 Lake Nona Road Orlando, FL 32827			
		V Thakkar, Rasesh 9801 Lake Nona Road Orlando, FL 32827			
		V Anand, Christopher 9801 Lake Nona Road Orlando, FL 32827			
		MGR Voss, Jeff 9801 Lake Nona Road Orlando, FL 32827			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  Pres			Date: 4-13-06 Daytime Phone #: 407-816-6598		

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