


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Jan 09, 2006 08:00 AM  
Secretary of State

<b>DOCUMENT # L98000000028</b> 1. Entity Name FOREST VILLAGE FLORIDA GROUP, L.C.	
--	---

Principal Place of Business 245 FLAMINGO DRIVE COCOA, FL 32926	Mailing Address 245 FLAMINGO DRIVE COCOA, FL 32926
--	--



01042006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3483974	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

**6. Name and Address of Current Registered Agent**

AMATO, KATHLEEN R  
3701 MEADOW LARK  
COCOA, FL 32926

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HORD, RONALD 245 FLAMINGO DRIVE COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SIMON, JOHN J 245 FLAMINGO DRIVE COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000381096  
01/11/06-80040-014 50.00

**DO NOT WRITE  
IN THIS SPACE**

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: Ronald Hord RONALD HORD 1/5/06 321631-0305  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #