

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003090

Entity Name: ALOMA PARK, L.L.C.

FILED  
Apr 19, 2006  
Secretary of State

**Current Principal Place of Business:**

5901 BRICK COURT  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

5901 BRICK COURT  
WINTER PARK, FL 32792

**New Mailing Address:**

FEI Number: 59-3581017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VERGASON, MARK E  
5901 BRICK CT.  
WINTER PARK, FL 32792 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: MGR ( ) Delete  
Name: SILLIMAN, WILLIAM M  
Address: 4814 KENSINGTON PARK BLVD.  
City-St-Zip: ORLANDO, FL 32819

Title: MGR ( ) Delete  
Name: REICHE, ROBERT B  
Address: 4814 KENSINGTON PARK BLVD.  
City-St-Zip: ORLANDO, FL 32819

Title: MGR ( ) Delete  
Name: SOJOURNER, NANCY C  
Address: 5901 BRICK COURT  
City-St-Zip: WINTER PARK, FL 32792

Title: MGR ( ) Delete  
Name: VERGASON, MARK E  
Address: 5901 BRICK CT.  
City-St-Zip: WINTER PARK, FL 32792

**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:

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: NANCY C. SOJOURNER

MGR

04/19/2006

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