2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## FILED Mar 23, 2006 8:00 am Secretary of State

3/1:

DOCUMENT # L99000004919 1. Entity Name				03-15-2006 90024 045 ****50.00				
ERA PRESTIGE PROPERTIES & ASSOCIATES, LLC								
Principal Place of Business		Mailing Address		1				
116 TREEMONTE DRIVE ORANGE CITY FL 32763		116 TREEMONTE DRIVE ORANGE CITY FL 32763						
2. Principal Place of Business		3. Mailing Address				AN AMIL BRIEF BRIEF	U 610 10496 KILI U	
Suite, Apt. #, etc.		Suite. Apt. #, etc.		1st MOORE	CH2E083	(10/05)		
City & State		City & State		4. FEI Number 59-359854	11	<del></del>	oplied For of Applicable	
Zip .	Country	Zip	Count	lry	5. Certificate of Status Desired		\$5.00 Add Fee Require	
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New	Registered /	Agent	
VOLKMANN, E. LAVONNE								
116	TREEMONTE DRIVE INGE CITY FL 32763		·		(P.O. Box Number is Not Acceptal	ole)		
				City.	·····		T	
·				City FL Zip Code				
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	registere	ed office or registe	ared agent, or both, in the State of I	lorida. I am	familiar with,	and accept
SIGNATURE Squalute, hybrid or printed marks of registered agent and late it explosures. (NOTE Registered Agent signature required when tended registered when tended when tended when tended registered.)								
FILE NOW!!! FEE								
				ıy 1, 2006				
9. MANAGING MEMBERS/MANAGERS			10.	<u> </u>	ADDITION	S/CHANGES	<del>,</del>	
TITLE			TITLE	l l			Change	Addition
NAME STREET ADDRESS	VOLKMANN, E. LAVONNE	•		ET ADDRESS				
City-St-Zip			-ST-2IP		•			
TITLE		☐ Delete	TITLE		<del></del>		☐ Change	☐ Addition
NAME			NAM	4				
STREET ADDRESS CITY - ST-ZIP				ET ADDRESS ( -ST-ZIP				
TITLE	<del></del>	Delete	TITUE				Change	☐ Addition
NAME			NAM				- yrangs	
STREET ADDRESS				ET ADORESS				
CITY-ST-ZIP		— · ·		-ST-ZIP			_:-	
TITLE NAME		☐ Delete	TITLE NAM:	ľ			☐ Change	☐ Addition
STREET ADDRESS				ET ADDRESS				
CITY-ST-71P			CITY	-ST-ZIP				
TITLE		☐ Delete	TITLE	<b>I</b>			Change	Addition
NAME STREET ADDRESS			NAME STRE	ET ADDRESS				
CITY-ST-ZIP				- ST - ZIP				
TITLE		Delete	IIIL	·	· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition
NAME CONCEL ADDRESS			NAM	i i				
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP				
}	certify that the information supplied w	ith this filing does not qualify			and in Senting 110. Floring Claterton	. I livelbar and		-1

11. I bereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

NO TYPEO OF PRINTED NAME OF SHIRRING MANAGING NEWBER, MANAGER, OF AUTHORIZED REPRESENTATIVE

3-20-06 386-114-405



March 16, 2006

ERA PRESTIGE PROPERTIES & ASSOCIATES, LLC 116 TREEMONTE DRIVE ORANGE CITY, FL 32763

Subject: ERA PRESTIGE PROPERTIES & ASSOCIATES, LLC

Reference Number: (

L99000004919

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/rm ANNUAL REPORTS SECTION