2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000005486

1. Entity Name

NEWSTEAD SOUTH L.L.C.



Principal Place of Business

P.O. BOX 219 UPPERVILLE, VA 20185 Mailing Address

P.O. BOX 219

UPPERVILLE, VA 20185

FILED Apr 07, 2006 8:00 am Secretary of State

04-07-2006 90216 004 ****55.00



01232006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For S4-1955896 Not Applicable

5. Certificate of Status Desired S5.00 Additional

6. Name and Address of Current Registered Agent

DEUTSCH, STEVEN W 7805 SW SIXTH COURT GATEHOUSE ROAD PLANTATION, FL 33324

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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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			Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 ue by May 1, 2006				
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR M PIEDMONT MANAGEMENT CORPORATION P.O. BOX 219 UPPERVILLE, VA 20185				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP			DO NOT	WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-SI-ZIP					

<u>nalando</u>

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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.