2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

DOCUMENT # M00000002458

Entity Name
 WILLA SPRINGS INVESTORS LLC



Principal Place of Business

3990RUFFINROAD SUITE100ATTN:LEGAL SANDIEGO,CA92123JS

SIGNATURE:

Mailing Address

3990RUFFINROAD SUITE100ATTN:LEGAL SANDIEGO,CA92123JS

FILED Jan 19, 2006 08:00 AM Secretary of State



01052006Na Chg-LLC

CR2E083 (11/05)

4. FEI Number	Applied For
33-0937224	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

}		IN 1	HIS SPACE
	named entity submits this statement for the purpose of chan thons of registered agent.	ging its registered office or registered agent, or both	h, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and site it explicable	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi	lling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		To the second se
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CONTINENTAL AMERICAN PEOPERTIES, LTD 3990 RUFFIN ROAD, SUITE 100 SAN DIEGO, CA 92123	TO THE POST OF A ROLL OF THE POST OF THE P	1100000330728 01/24/06-80012-002 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		A MASS CONTRACTOR SERVICES	
TITLE NAME STREET ADDRESS GITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS DITY-ST-ZIP		IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		***************************************	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			···· <u> </u>
 indicated limited liai 	certify that the information supplied with this filling does not on this report is true and accurate and that my signature shalling company or the receiver or trundee empowered to execute	qualify for the exemptions contained in Chapter 11s all have the same legal effect as if made under occure this report as required by Chapter 608, Florida	e, Florida Statutes. I further certify that the information thi, that I am a managing member or manager of the a Statutes.