

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000768

FILED
Mar 30, 2006
Secretary of State

Entity Name: FLORIDIN REAL ESTATE VENTURES, LLC

Current Principal Place of Business:

5700 CLEVELAND ST
SUITE 420
VIRGINIA BEACH, VA 23462

New Principal Place of Business:

Current Mailing Address:

5700 CLEVELAND ST
SUITE 420
VIRGINIA BEACH, VA 23462

New Mailing Address:

FEI Number: 54-2011015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: SPARKS, JAMES H
Address: 5700 CLEVELAND ST SUITE 420
City-St-Zip: VIRGINIA BEACH, VA 23462

Title: MGR () Delete
Name: PARKER, DENNIS C
Address: 6 NORTH PARK DR SUITE 105
City-St-Zip: HUNT VALLEY, MD 21030

Title: MGR () Delete
Name: JOHNSON, ALFRED D
Address: 6 NORTH PARK DR SUITE 105
City-St-Zip: HUNT VALLEY, MD 21030

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:

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: DON UPHOUSE

CONT

03/30/2006

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