

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # M03000004105
 1. Entity Name
THE RESERVE AT PORT ORANGE, LLC



Principal Place of Business Mailing Address
C/O MARK SARNA, SARNA ENTERPRISES **C/O MARK SARNA, SARNA ENTERPRISES**
15 ENGLE STREET, SUITE 100 **15 ENGLE STREET, SUITE 100**
ENGLEWOOD, NJ 07631 **ENGLEWOOD, NJ 07631**

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01052008 No Chg-LLC CR2E083 (11/05)

4. FEI Number 75-3100969	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STORCH, GLENN D ESQ.
C/O STORCH & MORRIS, P.A.
420 SOUTH NOVA ROAD
DAYTONA BEACH, FL 32114

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2006

03/16/06-80017-024 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SARNA, MARK 15 ENGLE STREET, SUITE 100 ENGLEWOOD, NJ 07631
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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.

SIGNATURE: *by: Mark Sarna* 3/1/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #