

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000318

Entity Name: USA HAMPTONS 5, LLC

FILED
Feb 14, 2006
Secretary of State

Current Principal Place of Business:

US ADVISOR LLC
5 FINANCIAL PLAZA STE 105
NAPA, CA 94558

New Principal Place of Business:

US ADVISOR LLC
5 FINANCIAL PLAZA STE 205
NAPA, CA 94558

Current Mailing Address:

US ADVISOR LLC
5 FINANCIAL PLAZA STE 105
NAPA, CA 94558

New Mailing Address:

US ADVISOR LLC
5 FINANCIAL PLAZA STE 205
NAPA, CA 94558

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

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: MGRM () Delete
Name: MCALPINE, AUBRY J
Address: 31041 S. HAWKSMOOR DRIVE
City-St-Zip: RANCHO PALOS VERDES, CA 902756248

Title: MGRM () Delete
Name: MCALPINE, PATRICIA K
Address: 31041 S. HAWKSMOOR DRIVE
City-St-Zip: RANCHO PALOS VERDES, CA 902756248

ADDITIONS/CHANGES:

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: AUBREY J. MCALPINE

MGRM

02/14/2006

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