2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M04000002016

1. Entity Name VILLAGE COMMONS, LLC



FILED Jan 23, 2006 08:00 AN **Secretary of State**

Principal Place of Business 2 POND'S EDGE DRIVE CHADDS POND, PA 19317 Mailing Address

2 POND'S EDGE DRIVE CHADDS POND, PA 19317



DO NOT WRITE IN THIS SPACE

01032006 No Cha-LLC

CR2E083 (11/05)

4. FEI Number 20-1161641 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

5. Name and Address of Current Registered Agent

BRANDYWINE FINANCIAL SERVICES CORPORATION 2631 MCCORMICK DRIVE, STE. 101 CLEARWATER, FL 33759

DO NOT WRITE IN THIS SPACE

 The above named entity submits this statement for the purpose of chathe obligations of registered agent. 	anging its registered office or registered agent, or both	, in the State of Florida. I am familiar with, and accept
SIGNATURE Sunature, hoed or printed name of registered agent and title if explicable.	(NOTE, Registered Agent signature required when reinstating)	DATE

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

9. MANAGING MEMBERS/MANAGERS	The state of the s
TITLE MGR NAME VILLAGE COMMONS I, LLC STREET ADDRESS 2 POND'S EDGE DRIVE CITY-ST-ZIP CHADDS POND, PA 19317	######################################
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-51-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 cath; 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:

SIGNATUR

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

Daytime Phone #