## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # M04000003784

1. Entity Name

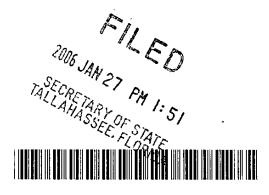
CARMEN R. FERREIRA - LEE VISTA, ORLANDO, LLC



Principal Place of Business

6200 THE COMERS PARKWAY NORCROSS, GA 30092-3365 Mailing Address

6200 THE COMERS PARKWAY NORCROSS, GA 30092-3365



01052006 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number	 		Applied For
	NOT APPLICABLE			Not Applicable
5.	Certificate of Status Desired		.00 Additional	

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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	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.	
SI	GNATURE	

(NOTE: Registered Agent signature required when reinstating)

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

9.	9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FERREIRA, CARMEN R 6200 THE COMERS PARKWAY NORCROSS, GA 300923365		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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:

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

1-23-06

770-243-8506

Daytime Phone #

Date