


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90070 023 ****50.00

DOCUMENT # M05000005018	
1. Entity Name ORCHID WATERFRONT, LLC	

Principal Place of Business 1001 PARK STREET SAUGATUCK, MI 49453	Mailing Address 1001 PARK STREET SAUGATUCK, MI 49453
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DO NOT WRITE IN THIS SPACE



01092006No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent LAKE, DAVID 4547 BERKSHIRE ROAD ST. JAMES CITY, FL 33956

**DO NOT WRITE
IN THIS SPACE**

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 <u>David Lake</u>	<u>DAVE LAKE</u>	<u>1/20/06</u>
<small>Signature, typed or printed name of registered agent and title if applicable</small>	<small>(NOTE: Registered Agent signature required when reconstituting)</small>	<small>DATE</small>

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEWEY, JAMES E 1001 PARK STREET SAUGATUCK, MI 49453
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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.
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SIGNATURE: <u>James Dewey</u>	<u>1-9-06</u>	<u>269-857-2461</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date</small>	<small>Daytime Phone #</small>