

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

DOCUMENT # M05000005613

1. Entity Name

ASHFORD POOL I GP LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 APR 24 AM 8:38

Principal Place of Business
14185 DALLAS PARKWAY, SUITE 1100
DALLAS TX 75254

Mailing Address
14185 DALLAS PARKWAY, SUITE 1100
DALLAS TX 75254



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

[Signature]

1st MOORE

CR2E083 (10/05)

4. FEI Number
AP-PLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reelecting)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
BENNETT, MONTGOMERY
14185 DALLAS PARKWAY, SUITE 1100
DALLAS TX 75254 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
BROOKS, DAVID A
14185 DALLAS PARKWAY, SUITE 1100
DALLAS TX 75254 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition
300074755743
05/17/06--01017--028 **\$200.00

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
BURNS, KEVIN P
445 BROAD HOLLOW ROAD, SUITE 239
MELVILLE NY 11747 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
ANGELO, BERNARD J
445 BROAD HOLLOW ROAD, SUITE 239
MELVILLE NY 11747 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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STREET ADDRESS
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☐ Delete

TITLE
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CITY - ST - ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption contained in Section 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:

[Signature]

DAVID A. BROOKS

3-23-06

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

Date

Daytime Phone #