

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 25, 2007 8:00 am
Secretary of State

05-25-2007 90199 039 ****50.00

DOCUMENT # M05000006981

1. Entity Name
WIN-WIN BEAZER POOL I (DELAWARE), LLC



Principal Place of Business
4800 HAMPDEN LANE, STE. 650
BETHESDA, MD 20814

Mailing Address
4800 HAMPDEN LANE, STE. 650
BETHESDA, MD 20814

40118502



05162007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|---|--------------------------------|
| 4. FEI Number 20-3917141 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

PARACORP INCORPORATED
236 EAST 6TH AVE.
TALLAHASSEE, FL 32303

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR INVESTORS AND DEVELOPERS SERVICES, INC. 4800 HAMPDEN LANE, STE. 650 2660 SOCEAN BETHESDA, MD 20814 BLVD #304 N PALM BEACH, FL 33480 |
| 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: Robert M. Keats, President, IDSI, Manager
5/17/07 201-652-5032
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #