

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 15, 2006 8:00 am**  
**Secretary of State**

02-15-2006 90131 035 \*\*\*\*\*55.00

|   |  |  |  |  |   |
|---|--|--|--|--|---|
| <b>DOCUMENT # L02000033029</b>  |  |  |  |  |   |
| <b>1. Entity Name</b><br>SPRIT RESIDENTIAL GROUP, LTD., CO.   |  |  |  |  |   |
| <b>Principal Place of Business</b><br>17311 NW 33RD COURT<br>MIAMI, FL 33056  |  |  | <b>Mailing Address</b><br>17311 NW 33RD COURT<br>MIAMI, FL 33056   |  |   |
| <b>2. Principal Place of Business</b>   |  | <b>3. Mailing Address</b>  |  |  |   |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.  |  |  |   |
| City & State  |  | City & State   |  |  |   |
| Zip   | Country  | Zip  | Country  | <b>4. FEI Number</b><br>02112006    Chg-LLC    CR2E083 (11/05)<br>16-1643537 |   |
| <b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$5.00 Additional Fee Required</b>   |  |  |  | Applied For<br>Not Applicable  |   |
| <b>6. Name and Address of Current Registered Agent</b>  |  |  | <b>7. Name and Address of New Registered Agent</b>   |  |   |
| BEEN, ALEXANDER<br>17311 NW 33RD COURT<br>MIAMI, FL 33056   |  |  | Name <u>BAIN, Alexander</u><br>Street Address (P.O. Box Number is Not Acceptable)<br><u>17311 NW 33rd CT.</u><br>City <u>MIAMI</u> <b>FL</b> Zip Code <u>33056</u> |  |   |
| <b>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.</b><br>SIGNATURE <u>[Signature]</u> (NOTE: Registered Agent signature required when reinstating)    DATE _____   |  |  |  |  |   |
| <b>Filing Fee is \$50.00<br/>Due by May 1, 2006</b>   |  | <b>Make check payable to<br/>Florida Department of State</b>                 |  |  |   |
| <b>9. MANAGING MEMBERS/MANAGERS</b>   |  |  | <b>10. ADDITIONS/CHANGES</b>   |  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | MGR<br>BEEN, ALEXANDER<br>17311 NW 33RD COURT<br>MIAMI, FL 33056 | <input type="checkbox"/> Delete  |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                               | P/MGR<br>BAIN, Alexander<br>7060 SW 26th STREET<br>MIRAMAR FL 33023 |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | MGR<br>BEEN, LOLA<br>17311 NW 33RD COURT<br>MIAMI, FL 33056      | <input type="checkbox"/> Delete  |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                               | S/MGR<br>BAIN, LOLA<br>7060 SW 26th STREET<br>MIRAMAR FL 33023      |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete                                  |  |  |  |   |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |  |  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete                                  |  |  |  |   |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |  |  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete                                  |  |  |  |   |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |  |  |   |
| <b>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.</b> |  |  |  |  |   |
| <b>SIGNATURE:</b> <u>Alexander Bain Mgr</u> Date <u>2/11/06</u>   |  |  |  |  |   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE    Date    Daytime Phone #  |  |  |  |  |   |