


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 08, 2004 08:00 AM
Secretary of State

DOCUMENT # L99000005491
 1. Entity Name
 SPANISH OAKS APARTMENT HOMES, L.L.C.



Principal Place of Business Mailing Address
 8320 W. SUNRISE BLVD., SUITE 203 8320 W. SUNRISE BLVD., SUITE 203
 PLANTATION, FL 33322 PLANTATION, FL 33322

DO NOT WRITE IN THIS SPACE



06302004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3597065	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
 DAMONTE, JONATHAN JAMES
 12110 SEMINOLE BLVD.
 LARGO, FL 33778

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

**Filing Fee is \$50.00
 Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HOLDEN, JOHN, SR. 1845 MONTE CARLO WAY CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HOLDEN, PETER 901 NW 119TH AVE POMPANO BEACH, FL 33071
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 07/08/04-80018-011 90.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 authorized representative of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  7,6-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #