

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118233

FILED
Sep 12, 2007
Secretary of State

Entity Name: LANESBORO AT HEATHROW, LLC

Current Principal Place of Business:

3500 BLUE LAKE DRIVE
BIRMINGHAM, AL 35243

New Principal Place of Business:

5555 ANGLERS AVENUE
SUITE 1
FT. LAUDERDALE, FL 33312

Current Mailing Address:

3500 BLUE LAKE DRIVE
BIRMINGHAM, AL 35243

New Mailing Address:

5555 ANGLERS AVENUE
SUITE 1
FT. LAUDERDALE, FL 33312

FEI Number: 20-8035370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGMR () Change (X) Addition
Name: COSCAN LANESBORO, LL, C
Address: 5555 ANGLERS AVENUE, SUITE 1
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: MGMR () Change (X) Addition
Name: COLONIAL PROPERTIES, SERVICES, INC.
Address: 3500 BLUE LAKE DRIVE
City-St-Zip: BIRMINGHAM, AL 35243

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ALBERT C. PIAZZA

MGR

09/12/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date