

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000004091

FILED  
Apr 16, 2008  
Secretary of State

Entity Name: DIVOSTA HOMES HOLDINGS, LLC

## Current Principal Place of Business:

100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
BLOOMFIELD HILLS, MI 48304

## New Principal Place of Business:

## Current Mailing Address:

100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
BLOOMFIELD HILLS, MI 48304

## New Mailing Address:

FEI Number: 38-3691939

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: MGR ( ) Delete  
Name: CREGG, ROGER A  
Address: 100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: MGR ( ) Delete  
Name: DUGAS, RICHARD J JR  
Address: 100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: PRES (X) Delete  
Name: KOON, DAVID A  
Address: 4500 PGA BOULEVARD STE 400  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP (X) Delete  
Name: BLOCH, JEFFREY M  
Address: 4500 PGA BOULEVARD STE 400  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: SEC (X) Delete  
Name: COOK, STEVEN M  
Address: 100 BLOOMFIELD HILLS PKWY #300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: TR (X) Delete  
Name: ROBINSON, BRUCE E  
Address: 100 BLOOMFIELD HILLS PKWY #300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
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Title: ( ) Change ( ) Addition  
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City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROGER A CREGG

MGR

04/16/2008

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