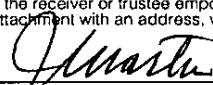


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90427 048 \*\*\*150.00

<b>DOCUMENT # F04000001085</b> 1. Entity Name <b>BLUEGREEN RECEIVABLES FINANCE CORPORATION VII</b>					
Principal Place of Business <b>4960 CONFERENCE WAY NORTH, SUITE 100 BOCA RATON, FL 33431</b>			Mailing Address <b>4960 CONFERENCE WAY NORTH, SUITE 100 BOCA RATON, FL 33431</b>		
2. Principal Place of Business - No P.O. Box # <b>4950 Communication Avenue</b>		3. Mailing Address <b>4950 Communication Avenue</b>			
Suite, Apt. #, etc. <b>Suite 900</b>		Suite, Apt. #, etc. <b>Suite 900</b>			
City & State <b>Boca Raton, Florida</b>		City & State <b>Boca Raton, Florida</b>		4. FEI Number <b>34-1978092</b>	
Zip <b>33431</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;">FL</span> Zip Code		
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 _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HERZ, ALLAN J <input type="checkbox"/> Delete 4960 CONFERENCE WAY NORTH, SUITE 100 BOCA RATON, FL 33431		TITLE NAME STREET ADDRESS CITY-ST-ZIP	See attached sheet. <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPT PULEO, ANTHONY M <input type="checkbox"/> Delete 4960 CONFERENCE WAY NORTH, SUITE 100 BOCA RATON, FL 33431		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WARDAK, AHMAD <input type="checkbox"/> Delete 4960 CONFERENCE WAY NORTH, SUITE 100 BOCA RATON, FL 33431		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANGELO, BERNARD J <input type="checkbox"/> Delete 445 BROAD HOLLOW RD STE 239 MELVILLE, NY 11747		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARTIN, JAMES R <input type="checkbox"/> Delete 4960 CONFERENCE WAY NORTH, SUITE 100 BOCA RATON, FL 33431		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PULEO, TERI <input type="checkbox"/> Delete 4960 CONFERENCE WAY N STE 100 BOCA RATON, FL 33431		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> 			<b>James R. Martin, Secretary</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <b>4-2-07</b> Daytime Phone # <b>561-912-8000</b>		

# ATTACHMENT

40089977

# F04000001085

Bluegreen Receivables  
Finance Corporation VII

## Officers:

Allan J. Herz, President  
4960 Conference Way North, Suite 100  
Boca Raton, Florida 33431

James R. Martin, Secretary  
4960 Conference Way North, Suite 100  
Boca Raton, Florida 33431

Anthony M. Puleo, Treasurer  
4960 Conference Way North, Suite 100  
Boca Raton, Florida 33431

Anthony M. Puleo, Vice President  
4960 Conference Way North, Suite 100  
Boca Raton, Florida 33431

Ahmad Wardak, Vice President  
4960 Conference Way North, Suite 100  
Boca Raton, Florida 33431

Teri Puleo, Vice President  
4960 Conference Way North, Suite 100  
Boca Raton, Florida 33431

Martha Waltermire, Vice President  
4960 Conference Way North, Suite 100  
Boca Raton, Florida 33431

## Directors:

Allan J. Herz  
4960 Conference Way North, Suite 100  
Boca Raton, Florida 33431

Anthony M. Puleo  
4960 Conference Way North, Suite 100  
Boca Raton, Florida 33431

Bernard J. Angelo  
445 Broad Hollow Road, Suite 239  
Melville, New York 11747