

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000006939

FILED  
May 01, 2007  
Secretary of State

Entity Name: ISLAND PLACE APARTMENTS, LLC

**Current Principal Place of Business:**

1551 N.W 167 STREET  
NORTH MIAMI BEACH, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

300 N.W. 12TH AVENUE  
MIAMI, FL 33128

**New Mailing Address:**

FEI Number: 65-1038815      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

MARTORANO, SALVATORE  
300 N.W. 12TH AVENUE  
MIAMI, FL 33128      US

**Name and Address of New Registered Agent:**

DOMINGUEZ, AGUSTIN  
300 N.W. 12TH AVENUE  
MIAMI, FL 33128      US

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: AGUSTIN DOMINGUEZ

05/01/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: V      ( ) Delete  
Name: REVALES, RONALD  
Address: 300 N.W. 12TH AVENUE  
City-St-Zip: MIAMI, FL 33128

Title: P      ( ) Delete  
Name: SIBLEY, JR, RUSSELL A  
Address: 300 NW 12TH AVENUE  
City-St-Zip: MIAMI, FL 33128

Title: V      ( ) Delete  
Name: ROVIN, TY  
Address: 300 NW 12TH AVENUE  
City-St-Zip: MIAMI, FL 33128

Title: S      ( ) Delete  
Name: RODRIGUEZ, KATHLEEN  
Address: 300 NW 12TH AVENUE  
City-St-Zip: MIAMI, FL 33128

**ADDITIONS/CHANGES:**

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: AGUSTIN DOMINGUEZ

RA

05/01/2007

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