

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000008302

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** SYMPHONY BUILDERS AT THE TIDES, LLC

**Current Principal Place of Business:**

1700 N. UNIVERSITY DR., SUITE 302  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

4400 W SAMPLE ROAD  
STE 118  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

1700 N. UNIVERSITY DR., SUITE 302  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

4400 W SAMPLE ROAD  
STE 118  
COCONUT CREEK, FL 33073

FEI Number: 65-1031219

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROTHENBERG, LARRY A P.A.  
815 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33071 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: MGRM ( ) Delete  
Name: SYMPHONY BUILDERS AT, THE TIDES, IN C .  
Address: 1700 UNIVERSITY DR., SUITE 302  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SYMPHONY BUILDERS AT, THE TIDES, IN C .  
Address: 4400 W SAMPLE ROAD, # 118  
City-St-Zip: COCONUT CREEK, FL 33073

I hereby certify that the information supplied with this filing does not qualify for the 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: SYMPHONY BUILDERS AT THE TIDES, INC.

MGRM

04/27/2006

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