2007, LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 19, 2007 08:00 AM DOCUMENT # L00000010387 Secretary of State SIMMONS ESTATE HOMES, L.L.C. Principal Place of Business Malling Address 1090 JUPITER PARK DR 1090 JUPITER PARK DR JUPITER, FL 33458 JUPITER, FL 33458 01312007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1090542 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SIMMONS, ROBERT WJR. DO NOT WRITE 6441 RIVER POINTE WAY JUPITER, FL 33478 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Repistered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS MGRM TITLE SIMMONS, ROBERT WJR. NAME 6441 RIVER POINTE WAY STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33478 TITLE 11000000672469 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE THLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accordate and that my alignature 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 true empewered to execute this report as required by Chapter 608, Florida Statutes.

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, DR AUTHORIZED REPRESENTATIVE

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Daytime Phone #