2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000015423

1. Entity Name

ST. LUCIE FARMS, LLC



Principal Place of Business 2200 WEST CYPRESS CREEK ROAD FT. LAUDERDALE, FL 33309 Mailing Address
P.O. BOX 5403
FT. LAUDERDALE, FL 33310

ddyngs

FILED Apr 17, 2008 8:00 am Secretary of State

04-17-2008 90266 001 *3,885.00



03252008 No Chg-LLC

CR2E083 (12/07)

772-340-3500

4. FEI Number 65-1060897	Applied For Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR

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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_	Signature, lyped or printed name of registered agent and title it applicable.	(NOTE: Registered Agent signature required when reinstating) DATE	
	NOW!!! FEE IS \$138.75 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CORE COMMUNITIES, LLC 2200 WEST CYPRESS CREEK ROAD FT. LAUDERDALE, FL 33309		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADORESS CITY+ST-ZIP		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_	
11. 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 is true and accurate and that my 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 eppowered to execute this report as required by Chapter 608, Florida Statutes.			

AUTHORIZED REPRESENTATIVE