2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000016112

1. Entity Name

STERLING HOMES OF BOCA GRANDE, LLC



Principal Place of Business Mail

P.O. BOX 605

BOCA GRANDE, FL 33921

Mailing Address 3225 S. DALE MABRY TAMPA, FL 33629

FILED Jun 18, 2004 08:00 AM Secretary of State



05282004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1082768 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WHIGHAM, DAVID L 18401 MURDOCK CIR. PORT CHARLOTTE, FL 33948

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The above named entity submits this statement for the purpose of chang the obligations of registered agent.	ing its registered office or registered agent, or both, i	n the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE

Filing Fee is \$50.00 Due by September 8, 2004

U00000162684 06/18/04-80001-003 55.00

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	BALDWIN, JON B MR.	
STREET ADDRESS	P. O. BOX 605	
CITY-ST-ZIP	BOCA GRANDE, FL 33921	
TITLE	MGRM	
NAME :	CONDA, II, GEORGE MR.	
STREET ADDRESS	3225 SOUTH DALE MABRY	
CITY-ST-ZIP	TAMPA, FL 33629	
TITLE		
NAME		
STREET ADORESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
THLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11. Thereby certify that the information supplied with this filing does not qualify for the exe		

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11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNAT	URE:	

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

4/10/04

Daytime Phone #