

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000767

FILED
Apr 26, 2004
Secretary of State

Entity Name: TRUST LAKE PARK ASSOCIATES, L.L.C.

Current Principal Place of Business:

3225 AVIATION AVE., SUITE 700
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

3225 AVIATION AVE., SUITE 700
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 65-1069430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CLINTON COMMUNITIES, L.L.C.
3225 AVIATION AVE., SUITE 700
COCONUT GROVE, FL 33133 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/MEMBERS:

Title: MGR () Delete
Name: STEWART, MARCUS
Address: 3225 AVIATION AVE., 7TH FL
City-St-Zip: MIAMI, FL 33133

Title: MGR () Delete
Name: WILSON, SHAWN
Address: 3225 AVIATION AVE., 7TH FL
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGR () Delete
Name: RIEGER, RANDY
Address: 3225 AVIATION AVE., 7TH FL
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGR () Delete
Name: TEMLING, W. PETER
Address: 3225 AVIATION AVE., 7TH FL
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGR (X) Delete
Name: NORRIS, WAYNE O
Address: 3225 AVIATION AVE., 7TH FL
City-St-Zip: COCONUT GROVE, FL 33133

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: MGR (X) Change () Addition
Name: BEZOLD, THOMAS
Address: 3225 AVIATION AVE., 7TH FL
City-St-Zip: COCONUT GROVE, FL 33133

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS J BEZOLD

MGR

04/26/2004

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