2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

	OCUMENT # L01000009687
١.	Entity Name
C	OURTYARD AT HOMESTEAD, LLC

Principal Place of Business 1230 NE 3RD TERRACE

HOMESTEAD, FL 33030

Mailing Address

C/O GPI 50 BROADWAY, 4TH FLOOR NEW YORK, NY 10004



03272006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number | Applied for | 13-4177140 | Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

Name and Address of Current Registered Agent

CORPDIRECT AGENTS, INC. 515 E. PARK AVE. TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of cha	anging its registered office or registered agent, or bot	th, in the State	of Florida. I am Ismilla	with, and accept
the obligations of registered agent.	}	Ì	·	•
SIGNATURE Signature, typed or printed here of registered agent and We if applicable	(NOTE, Repistered Agent eignature required when reinstating)		DATE .	
Filing Fee is \$50.00 Due by May 1, 2006		n4/29	1000515426 706-80206-021	En an

9.	MANAGING MEMBERS/MANAGERS						
TITLE NAME STREET ADDRESS CITY-ST-Z#	MGR GROSS, EDITH						
TITLE NAME STREET ADDRESS CITY-ST-ZIF							
TITLE NAME STREET ADDRESS CITY-ST-ZF							
TITLE NAME STREET ADDRESS CITY-ST-ZP							
Title Name Street address City-ST-ZIP							
TITLE NAME STREET ADDRESS							

DO NOT WRITE IN THIS SPACE

^{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 expurate 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 603, Florida Statutes.