

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 06, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000010981

1. Entity Name
PARKLAND CUSTOM HOMES, LLC



Principal Place of Business
**7250 N.W. 82ND TERRACE
PARKLAND, FL 33067**

Mailing Address
**7250 N.W. 82ND TERRACE
PARKLAND, FL 33067**



03032004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0645247

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**DONNELLY, MICHAEL
7250 N.W. 82ND TERRACE
PARKLAND, FL 33067**

**DO NOT WRITE
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 _____

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 May 1, 2004**

000000078353
03/08/04-80021-022 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
MANGONE & SONS INVESTMENTS, II, LLC
4801 WEST HILLSBORO BOULEVARD
COCONUT CREEK, FL 33073**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
MAURODIS, ANDREW S
8616 N.W. 60TH COURT
PARKLAND, FL 33067**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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.

SIGNATURE: _____

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

3/4/04 (954) 480-4265

Date

Daytime Phone #

Andrew S. Maurodis, Managing Member