## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L01000011096

Entity Name: THE PRESERVE AT SUNNY ISLES LLC

1515 SOUTH FEDERAL HIGHWAY,3300

BOCA RATON, FL 33432

Address:

City-St-Zip:

FILED Mar 16, 2007 Secretary of State

Current Principal Place of Business:			New Principal F	New Principal Place of Business:	
SUITE 300	TH FEDERAL ) TON, FL 3343				
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
SUITE 300	TH FEDERAL ) TON, FL 3343				
FEI Number	: 65-1121103	FEI Number Applied For ( )	FEI Number Not Applicable	( ) Certificate of Status Desired ( )	
Name and	l Address of C	Current Registered Agent:	Name and Addr	ess of New Registered Agent:	
JEFFREY A. DEUTCH, P.A. 7777 GLADES ROAD, SUITE 300 BOCA RATON, FL 33434 US			7777 GLADES R SUITE 300	JEFFREY A. DEUTCH, P.A. 7777 GLADES ROAD SUITE 300 BOCA RATON, FL 33434 US	
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its reg	istered office or registered agent, or both,	
SIGNATURE:				03/16/2007	
	Electror	nic Signature of Registered Age	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANG	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	ALTMAN DEVE	Delete LOPMENT C, ORPORATION EDERAL HIGHWAY, #300 FL 33432	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ALTMAN, JOEL	EDERAL HIGHWAY, 3300	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ALTMAN PART	Delete NERS SUNN, Y ISLES, LTD EDERAL HIGHWAY, #300 FL 33432	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:		Delete ARTNERS, SUNNY ISLES, L T D	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: JEFFERY A. ROBERTS P 03/16/2007