

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012829

FILED
Apr 12, 2005
Secretary of State

Entity Name: AVENTURA PRESERVE INVESTORS, LLC

Current Principal Place of Business:

280 TRUMBULL STREET
% REAL ESTATE LAW DEP.,H-11F CIGNA CORP.
HARTFORD, CT 06103

New Principal Place of Business:

C/O THE BRADFORD GROUP -410 JERICHO TPKE
SUITE 200
JERICHO, NY 11753

Current Mailing Address:

280 TRUMBULL STREET
% REAL ESTATE LAW DEP.,H-11F CIGNA CORP.
HARTFORD, CT 06103

New Mailing Address:

C/O THE BRADFORD GROUP -410 JERICHO TPKE
SUITE 200
JERICHO, NY 11753

FEI Number: 06-1627189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

BIANCO, BARBARA W
17100 NORTH BAY ROAD
1908
SUNNY ISLES BEACH, FL 33160 US

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: BARBARA BIANCO

04/12/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: CG AVENTURA, LLC,
Address: 280 TRUMBULL STR , CIGNA CORP.
City-St-Zip: HARTFORD, CT 06103

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BIANCO, BARBARA W
Address: 17100 NORTH BAY ROAD, 1908
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: BARBARA BIANCO

MGR

04/12/2005

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