

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013924

FILED  
Mar 08, 2007  
Secretary of State

Entity Name: EMERALD DUNES MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

2100 EMERALD DUNES DRIVE  
WEST PALM BEACH, FL 33411

**New Principal Place of Business:**

**Current Mailing Address:**

2100 EMERALD DUNES DRIVE  
WEST PALM BEACH, FL 33411

**New Mailing Address:**

FEI Number: 65-1136642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHERRY, RICHARD G  
4400 PGA BLVD  
SUITE 900  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

CHERRY, RICHARD G  
8409 N. MILITARY TRAIL  
SUITE 123  
PALM BEACH GARDENS, FL 33410 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:

03/08/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FINCH, RAYMOND R III  
Address: 2100 EMERALD DUNES DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: MGR (X) Delete  
Name: FINCH, RAYMON R JR  
Address: 2100 EMERALD DUNES DR  
City-St-Zip: WEST PALM BEACH, FL 33411

**ADDITIONS/CHANGES:**

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

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 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.

SIGNATURE: RAYMON FINCH, III

MGRM

03/08/2007

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