2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000015008

1. Entity Name

ARBOR GREEN OF DEERFIELD, L.L.C.

SIGNATURE: SIGNATURE AND TYPED OR



FILED Feb 05, 2003 8:00 am Secretary of State 02-05-2003 90027 012 ****50.00

2. Principal Place of Business 3. Mailing Address Sulte, Aprl 4, obc. Sulte, Aprl 4, obc. Sulte, Aprl 4, obc. CHEOK HERE IF MAKING CHANGES Sulte, Aprl 4, obc. Sulte, Aprl 4, obc. CHEOK HERE IF MAKING CHANGES Sulte, Aprl 4, obc. CHEOK HERE IF MAKING CHANGES A. FEI Number 65-1135547 Applicable For Not Applicable For Not Applicable St. Outrier 65-1135547 Applicable For Not Applicable St. Outrier 65-1135547 Applicable	Principal Plac	ce of Business	Mailing Address	Mailing Address						
Suite, Apt. 4, etc. City & State	1311 NEWPORT CENTER DRIVE WEST. STE. C DEERFIELD BEACH FL 33442									
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City & State City & State City &	2. Principal Place of Business		3. Mailing Address							
Stock Stoc	Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
6. Name and Address of Current Registered Agent WACHS, JEFFREYS S. ESQ	City & Stat	е	City & State	City & State			ber 65-1135547			
S. Name and Address of Current Registered Agent WACHS, JEFFREYS, S. ESO. 1177 S.E. 370 AVE. FORT LAUDERDALE FI. 33318 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligators of registered agent, or both, in the State of Florida. SIGNATURE	Zip Country		Zip	Zip Country		5. Certifica	te of Status Desired			7
WACHS, JEFFREYS S, ESQ. 1177 SLE 3RD AVE. FORT LAUDERDALE FL 33316 City FL Zip Code	1. 1911	6. Name and Address of Curren	t Registered Agent			7. Name ar	nd Address of New Reg	istered Agent		7
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named analy submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent and title if spotsable. SIGNATURE Signature. Syned or present name of registered agent and title if spotsable. RELE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 9. MANAGING MEMBERS / MANAGERS 10. ADDITIONS / CHANGES INTER ADDRESS OF STATE ADDRESS	14/4/	NIG IFFEDEVO O FOO			Name					7
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WILLIAM J. GAULO, MEMBER

NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE