

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000017743	
1. Entity Name AMERIHOMES DEVELOPMENT, L.L.C.	
Principal Place of Business 709 NW 84TH STREET GAINESVILLE, FL 32607 US	Mailing Address 709 NW 84TH STREET GAINESVILLE, FL 32607 US



DO NOT WRITE IN THIS SPACE

04262005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1151425	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CUEVAS, ANDREW ESQ.
536 BILTMORE WAY
CORAL GABLES, FL 33134**

**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, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALBARRACIN REVILLA, JOSE ALBERTO 709 NW 84TH STREET GAINESVILLE, FL 32607
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04/29/05-80092-019 50.00

**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

Date

Daytime Phone #

AMERIHOMES DEVELOPMENT, L.L.C.

4/24/05

(352) 331-7841