2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000017974

Entity Name
 CARRIAGE LAKE AT VERO, L.C.



Principal Place of Business

2825 BUSINESS CENTER BLVD. WICKHAM BUSINESS PARK, STE. C-1 MELBOURNE, FL 32940 Mailing Address

2825 BUSINESS CENTER BLVD. WICKHAM BUSINESS PARK, STE. C-1 MELBOURNE, FL 32940

FILED Jul 20, 2004 08:00 AM Secretary of State



07152004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3754708 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SIMMS, DONALD L 2825 BUSINESS CENTER BLVD. WICKHAM BUSINESS PARK, STE. C-1 MELBOURNE, FL 32940

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8. The above named entity submits this statement for	or the purpose of changing its registered office o	r registered agent, or both, in the State of	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 reinstaling)

DATE

Filing Fee is \$50.00 Due by September 8, 2004

ş	MANAĞINĞ MEMBERS/MANAGERS
NILE	MGR
NAME	SIMMS, DONALD L
STREET ADDRESS	2825 BUSINESS CTR BLVD WICKHAM BUSINESS PK
CITY-ST-ZIP	MELBOURNE, FL 32940
TITLE	
NAME	
STREET ADDRESS	
City-ST-Zip	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
City-St-Zip	
TITLE	
NAME	
STREET ADDRESS	_
CITY-ST-ZIP	
11. I hereby	certify that the information supplied with this filling does not qualify for the exem

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11. I hereby certify that the information supplied with this filling 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 path; that I am a managing member or manager of the limited liability company or the neceiver or trustee empowered to execute his report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

7/6/04

321-259-0202

Daytime Phone #