2005 LIMITED LIABILITY COMPANY

FILED Apr 27, 2005 08:00 AM

ANNUAL REPORT				Secretary of State	
DOCUMENT # L01000018510					
1. Entity Name SYMPHONY BUILDERS AT PALM COVE GOLF AND YACHT CLUB, LLC					
Principal Place of Business 1700 N. UNIVERSITY DRIVE 302 CORAL SPRINGS, FL 33071 Mailing Address 1700 N. UNIVERSITY DRIVE 302 CORAL SPRINGS, FL 33071					
DO NOT WRITE IN THIS SPA			CE	03222005No Chg-LLC CR2E083 (10/03)	
				4. FEI Number Applied For 65-1150209 Not Applicab	
		The second of th	i se i i i i i i i i i i i i i i i i i i	5. Certificate of Status Desired \$5.00 Additional Fee Required	
	6. Name and Address of Cur	rent Registered Agent			
ROTHENBERG, LARRY A 815 CORAL RIDGE DR. CORAL SPRINGS, FL 33071				DO NOT WRITE	
00,012 01 (MC00, 12 000) 1				IN THIS SPACE	
8. The above the obligation SIGNATURE.	tions of registered agent.	ent for the purpose of changing its register	ed office or register	ed agent, or both, in the State of Florida. I am familiar with, and accep	
	Signature, typed or printed name of registered	agent and title if applicable. (NOTE, Register	ed Agent signature required	when reinstating) DATE	
F	iling Fee is \$50.00 ue by May 1, 2005				
g,		MBERS/MANAGERS	4		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SYMPHONY BUILDERS AT 1700 N. UNIVERSITY DRIVE CORAL SPRINGS, FL 3307			04/27/05-80115-0 06 5 5.00	
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TITLE NAME STREET ADDRESS					

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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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