

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022000

**FILED**  
**Apr 23, 2007**  
**Secretary of State**

**Entity Name:** LEVITT AND SONS OF MANATEE COUNTY, LLC

**Current Principal Place of Business:**

7777 GLADES ROAD  
SUITE 410  
BOCA RATON, FL 33434

**New Principal Place of Business:**

2200 WEST CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

7777 GLADES ROAD  
SUITE 410  
BOCA RATON, FL 33434

**New Mailing Address:**

2200 WEST CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309

**FEI Number:** 65-0063563

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** LEVITT AND SONS, LLC,  
**Address:** 7777 GLADES ROAD,SUITE 410  
**City-St-Zip:** BOCA RATON, FL 33434

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** LEVITT AND SONS, LLC,  
**Address:** 2200 WEST CYPRESS CREEK ROAD  
**City-St-Zip:** FORT LAUDERDALE, FL 33309

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:** GEORGE P. SCANLON

CFO

04/23/2007

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