

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008742

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** ARBORSTONE APARTMENT COMPANY, LLC

**Current Principal Place of Business:**

2755 BORDER LAKE ROAD  
SUITE 101  
APOPKA, FL 327034857

**New Principal Place of Business:**

**Current Mailing Address:**

2755 BORDER LAKE ROAD  
SUITE 101  
APOPKA, FL 327034857

**New Mailing Address:**

FEI Number: 04-3639928      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

KANAGA, MERIDYTHE  
2755 BORDER LAKE ROAD  
SUITE 101  
APOPKA, FL 327034857 US

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: P ( ) Delete  
Name: KANAGA, MERIDYTHE  
Address: 2755 BORDER LAKE ROAD, SUITE 101  
City-St-Zip: APOPKA, FL 327034857

Title: ST ( ) Delete  
Name: KANACA, RICK  
Address: 2755 BORDER LAKE RD STE 101  
City-St-Zip: APOPKA, FL 32703

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MERIDYTHE KANAGA

P

05/01/2007

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