2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000009938

PULTE DELRAY OCEAN INVESTMENTS, LLC



FILED Feb 07, 2008 08:00 A Secretary of State

Principal Place of Business

41 SOUTHEAST 5TH STREET SECOND FLOOR BOCA RATON, FL 33432 US

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CR2E083 (12/07)

4. FE! Number 81-0548751

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GERSHON, HOLLY GAYLE 1489 W. PALMETTO PARK RD #425 BOCA RATON, FL 33486

DO NOT WRITE IN THIS SPACE

8.	I. 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)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

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MANAGING MEMBERS/MANAGERS 9. TITLE MGR NAME PULTE, MARK T STREET ADDRESS 41 SOUTHEAST 5TH STREET 2ND FLOOR CITY-ST-ZIP BOCA RATON, FL 33432 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same local effect as if made under each that the information indicated on this report is true and accurate and that my signature shall have the same local effect as if made under each that the information indicated on this report is true and accurate and that my signature shall have the same local effect as if made under each that the information indicated on this report is true and accurate and that my signature shall have the same local effect as if made under each that the information indicated on this report is true and accurate and that my signature shall have the same local effect as if made under each that the information indicated on this report is true and accurate and that my signature shall have the same local effect as if my local effect as gnature shall have the same legal effect as if made under oath; that I am a managing member or manager of the red to execute this report as required by Chapter 608, Florida Statutes. indicated on this report is true and accurate and that pre-

SIGNATURE

Member IG MEMBER, OR AUTHORIZED REPRESENTATIVE