


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000010171 1. Entity Name COCO LUNETTE ORLANDO 102, L.L.C.	
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Principal Place of Business 4200 CONROY RD STE H-240 ORLANDO, FL 32839	Mailing Address 5825 SUNSET DRIVE, SUITE 309 SOUTH MIAMI, FL 33143
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02182005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0714799	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BOLANOS, TRUXTON, P.A.
2121 PONCE DE LEON BLVD., SUITE 600
CORAL GABLES, FL 33134

**DO NOT WRITE
IN THIS SPACE**

8. 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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BEINER, EDWARD W 10020 SW 70 AVE MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BALOCCO, GUIDO 2000 S BAYSHORE DR #2 MIAMI, FL 33133
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04/21/05-80102-011 50.00

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IN THIS SPACE**

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: *[Signature]* 4/15/05 305-8731
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #