

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 18, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000021529**

1. Entity Name  
**VERANDA HOLDINGS, LLC**



Principal Place of Business

**14600 SW 136 SR.  
MIAMI, FL 33186**

Mailing Address

**C/O E. HARRIS  
111 SW 3RD ST., 6TH FLOOR  
MIAMI, FL 33130**



03092005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**01-0756711**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HARRIS, ELLIOTT  
111 SW 3RD STREET 6TH FL  
MIAMI, FL 33130**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HAV, LLC
STREET ADDRESS	1360 PEACHTREE ST., NE, #1000
CITY - ST - ZIP	ATLANTA, GA 30309
TITLE	MGRM
NAME	ORANGE LAKE DEVELOPMAENT INC
STREET ADDRESS	14600 SW 136 ST.
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	MGRM
NAME	SKY INVESTMENT OF SOUTH FLORIDA INC
STREET ADDRESS	14600 SW 136TH ST.
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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03/18/05-80068-020 55.00

**DO NOT WRITE  
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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**ELLIOTT HARRIS**

Date

Daytime Phone #

**3/15/05 305-358-0146**