

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023036

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: ATLANTIC INDIAN CREEK, L.C.

**Current Principal Place of Business:**

18851 N.E. 29TH AVE  
SUITE 901  
MIAMI, FL 33180

**New Principal Place of Business:**

18851 N.E. 29TH AVE  
SUITE 901  
AVENTURA, FL 33180

**Current Mailing Address:**

18851 N.E. 29TH AVE  
SUITE 901  
MIAMI, FL 33180

**New Mailing Address:**

18851 N.E. 29TH AVE  
SUITE 901  
AVENTURA, FL 33180

FEI Number: 33-1071101

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REGISTERED AGENTS OF FLORIDA, LLC  
100 SOUTHEAST 2ND STREET STE. 2900  
MIAMI, FL 33131 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: HALE, GABRIELLA  
Address: 18305 BISCAYNE BLVD #402  
City-St-Zip: AVENTURA, FL 33160

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: APARTMENTS AND LAND, MANAGEMENT, LL C  
Address: 18851 N.E. 29TH AVE, SUITE 901  
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JEAN PIERRE REIN

AR

04/29/2005

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