

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027732

Entity Name: MDC MAGNOLIA PARK, LLC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

11701 LAKE VICTORIA GARDENS AVENUE
SUITE 2202
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

11701 LAKE VICTORIA GARDENS AVENUE
SUITE 2202
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

C/O MENIN DEVELOPMENT
11701 LAKE VICTORIA GARDENS AVE STE 2202
PALM BEACH GARDENS, FL 33410

New Mailing Address:

C/O MENIN DEVELOPMENT
11701 LAKE VICTORIA GARDENS AVE STE 2202
PALM BEACH GARDENS, FL 33410

FEI Number: 05-0559072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MENIN, CRAIG I
C/O MENIN DEVELOPMENT COMPANIES
11701 LAKE VICTORIA GARDENS AV, STE 2202
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

CM RAC, INC.
C/O MENIN DEVELOPMENT
11701 LAKE VICTORIA GARDENS AV, STE 2202
PALM BEACH GARDENS, FL 33410 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: CRAIG MENIN

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MENIN, CRAIG I
Address: 11701 LAKE VICTORIA GARDENS AV, STE 2202
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM () Delete
Name: RBJ, LLC,
Address: 11701 LAKE VICTORIA GARDENS AV, STE 2202
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: MLY MAGNOLIA, LLC.,
Address: 1120 BREAKERS WEST WAY
City-St-Zip: WEST PALM BEACH, FL 33410

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: ROBERT JACOBY

VP

04/30/2008

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