2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028428

Entity Name: TROPICAL HOMES DEVELOPERS, LLC

FILED Feb 17, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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6035 SW 120 STREET MIAMI, FL 33156

Current Mailing Address: New Mailing Address:

6035 SW 120 STREET MIAMI, FL 33156

FEI Number: 32-0039223 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

OSORNO, JUAN M 6035 SW 120 STREET MIAMI, FL 33156 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:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MEMBERS:

 Title:
 MGRM () Delete

 Name:
 FREYDELL, WILLIAM

 Address:
 6035 SW 120 ST

Address: 6035 SW 120 ST City-St-Zip: MIAMI, FL 33156

 Title:
 MGRM
 () Delete

 Name:
 VELEZ, PATRICIA

 Address:
 6035 SW 120 ST

 City-St-Zip:
 MIAMI, FL 33156

 Title:
 MGRM
 (X) Delete

 Name:
 PELAEZ, PATRICIA

 Address:
 6035 SW 120 ST

City-St-Zip: MIAMI, FL 33156

 Title:
 MGR
 (X) Delete

 Name:
 OSORNO, JUAN

 Address:
 6035 SW 120 ST

 City-St-Zip:
 MIAMI, FL 33156

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Date

Name: PELAEZ, PATRICIA E Address: 6035 SW 120 ST City-St-Zip: MIAMI, FL 33156

Title: MGR (X) Change () Addition

 Name:
 OSORNO, JUAN M

 Address:
 6035 SW 120 ST

 City-St-Zip:
 MIAMI, FL 33156

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

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: JUAN M OSORNO MGR 02/17/2004