

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029567

FILED  
Jun 17, 2009  
Secretary of State

Entity Name: FLORIDA ESTATE HOMES, LLC

## Current Principal Place of Business:

16040 SW 154 AVENUE  
MIAMI, FL 33187

## New Principal Place of Business:

## Current Mailing Address:

16040 SW 154 AVENUE  
MIAMI, FL 33187

## New Mailing Address:

FEI Number: 06-1662069      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

BERNARD, ANTHONY  
9032 SW 152ND STREET  
MIAMI, FL 33157      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/MANAGERS:

Title: DP ( ) Delete  
Name: DAVIDSON, MOSES C  
Address: 16040 SW 154 AVENUE  
City-St-Zip: MIAMI, FL 33187

Title: DV ( ) Delete  
Name: DAVIDSON, CARLITHIA S  
Address: 25863 S.W. 128 CT  
City-St-Zip: PRINCETON, FL 33032

Title: DS ( ) Delete  
Name: DAVIDSON, VICTORIA  
Address: 16040 S.W. 154 AVE.  
City-St-Zip: MIAMI, FL 33187

Title: DT ( ) Delete  
Name: DAVIDSON, MOSES JR.  
Address: 16040 S.W. 154 AVE.  
City-St-Zip: MIAMI, FL 33187

## ADDITIONS/CHANGES:

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

Title: DV (X) Change ( ) Addition  
Name: DAVIDSON, URIEL A  
Address: 16040 S.W. 154 AVE  
City-St-Zip: MIAMI, FL 33187

Title: DS (X) Change ( ) Addition  
Name: DAVIDSON, VICTORIA L  
Address: 16040 S.W. 154 AVE.  
City-St-Zip: MIAMI, FL 33187

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

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: MOSES DAVIDSON

DP

06/17/2009

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