


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 15, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000030716**

1. Entity Name  
 CASA DEL SOL OF TEQUESTA, L.L.C.



Principal Place of Business      Mailing Address

658 WEST INDIANTOWN ROAD      4400 MARSH LENDING BLVD #2  
 SUITE 211      PONTE VEDRA BEACH, FL 32082  
 JUPITER, FL 33458

**DO NOT WRITE IN THIS SPACE**



03112005No Chg-LLC      CR2E083 (10/03)

4. FEI Number      Applied For  
 11-3671788      Not Applicable

5. Certificate of Status Desired            **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GIRVIN, D.R. ESQ.  
 1080 EAST INDIANTOWN ROAD  
 STE. 102  
 JUPITER, FL 33477

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HELM, JAMES T PO BOX 3967 JUPITER, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRUCE, ROBERT G 4400 MARSH LENDING BLVD #2 PONTE VEDRA BEACH, FL 32082
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**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:** *Robert G. Bruce*      3/14/05      (904) 285-0400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #