
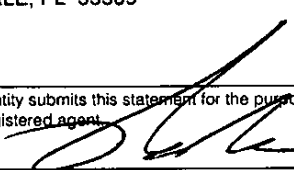
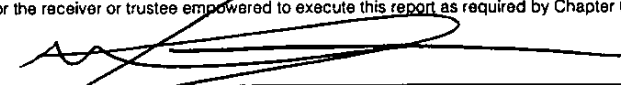


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90025 049 ****50.00

DOCUMENT # L02000030942 1. Entity Name FLORIDIAN ESTATE BUILDERS, LLC					
Principal Place of Business 2101 WEST COMMERCIAL BLVD., SUITE 4100 FORT LAUDERDALE, FL 33309			Mailing Address 2101 WEST COMMERCIAL BLVD., SUITE 4100 FORT LAUDERDALE, FL 33309		
2. Principal Place of Business 2101 W. Commercial Blvd. Suite, Apt. #, etc. Suite 2800		3. Mailing Address 2101 W. Commercial Blvd. Suite, Apt. #, etc. Suite 2800			
City & State Ft. Lauderdale, FL		City & State Ft. Lauderdale, FL		4. FEI Number 01-0755151	
Zip 33309		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBERT S. FORMAN, P.A. 2101 WEST COMMERCIAL BLVD., SUITE 4100 FORT LAUDERDALE, FL 33309				7. Name and Address of New Registered Agent Name Robert S. Forman Street Address (P.O. Box Number is Not Acceptable) 2101 West Commercial Blvd. Suite 2800 City Ft. Lauderdale FL 33309	
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. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 30%; text-align: center;"> Robert S. Forman </div> <div style="width: 30%; text-align: right;"> 4/25/05 <small>DATE</small> </div> </div>					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHIMM, KENNETH L 2101 W COMMERCIAL BLVD #4100 FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kenneth L. Shimm 2101 West Commercial Blvd. Suite 2800 Fort Lauderdale, FL 33309
<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				4/25/05 (954) 492-1980 <small>Date Daytime Phone #</small>	
Kenneth L. Shimm, Managing Member					

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