


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 17, 2007 08:00 AM**  
**Secretary of State**


**DOCUMENT # L02000034575**

1. Entity Name  
 PLANTATION PROMENADE, LLC



Principal Place of Business 1541 SUNSET DRIVE STE. 300 CORAL GABLES, FL 33143	Mailing Address 1541 SUNSET DRIVE STE. 300 CORAL GABLES, FL 33143
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**DO NOT WRITE IN THIS SPACE**



03262007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number 76-0725250	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HIGIER, GERALD M  
 1541 SUNSET DRIVE STE. 300  
 CORAL GABLES, FL 33143

**DO NOT WRITE IN THIS SPACE**

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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HIGIER, GERALD M 1541 SUNSET DRIVE STE. 300 CORAL GABLES, FL 33143
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 04/26/07-80075-012 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *Gerald M. Higier*      *4/12/07* 305. 666-2140

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