


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

**FILED
Apr 29, 2005 08:00 AM
Secretary of State**

DOCUMENT # L03000020366
1. Entity Name
TULIP WOODS HOUSE, LLC



Principal Place of Business 4420 N.W. 28TH WAY BOCA RATON, FL 33434	Mailing Address 4420 N.W. 28TH WAY BOCA RATON, FL 33434
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04262005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 14-1887173	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent
MANSOURIAN, GRETCHEN F
4420 N.W. 28TH WAY
BOCA RATON, FL 33434

**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)
Signature, typed or printed name of registered agent and title if applicable DATE

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MANSOURIAN, GRETCHAN 4420 NW 28TH WAY BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MANSOURIAN, VARTGEZ 4420 NW 28TH WAY BOCA RATON, FL 33434
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04/29/05-80092-004 50.00

**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)(f), 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: *Gretchen Mansourian* 4/29/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #