2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000026336

1. Entity Name

VILLAS AT CORAL WAY, L.L.C.



Acres Acres

FILED Apr 23, 2007 08:00 A Secretary of State

Principal Place of Business

10 N.W. 42ND AVE MIAMI, FL 33126 Mailing Address

10 N.W. 42ND AVE MIAMI, FL 33126



04172007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	•	Applied For
72-1868232		Not Applicable
5. Certificate of Status Desired		\$5.00 Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

MOURIZ, REINALDO J 10 N.W. 42ND AVE STE 700 MIAMI, FL 33126

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	t
	the obligations of registered agent.	

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOURIZ, REINALDO J 10 N.W. 42ND AVE., SUITE 400 MIAMI, FL 33126	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP	Company of the second	

000000724760 05/02/07-80124-005 50.00

DATE

DO NOT WRITE IN THIS SPACE

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 arcturate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company or the receiper or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/18/07

