2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND KIPED OF PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESE

DOCUMENT # L03000032472

Entity Name

VILLAGE AT HARBOR BEACH DEVELOPMENT, LLC



Principal Place of Business

9095 S.W. 87 AVENUE, SUITE 777 MIAMI, FL 33176

Mailing Address

9095 S.W. 87 AVENUE, SUITE 777 MIAMI, FL 33176

FILED Mar 12, 2008 8:00 am Secretary of State

03-12-2008 90245 001 ***416.25

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01102008 No Chg-LLC

CR2E083 (12/07)

| 4. | FEI Number | | |
|------------|------------|--|--|
| 20-0163543 | | | |

James R. Mitchell

305-270-0870

3/10/08

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MITCHELL, JAMES R 9095 S.W. 87 AVENUE, SUITE 777 MIAMI, FL 33176

SIGNATURE:

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|----|------|-----|----|
| IN | THIS | SPA | CE |

| 8. The above-ramed 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 obligat | ions of registered agent. | 1 \ 01 | | | |
| SIGNATURE NO Change | | | | | |
| Signature, tyled or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstatung) DATE | | | | | |
| EUE | NOWILI FEE IS \$138.75 | | | | |
| | 1, 2008 Fee will be \$538.75 | | | | |
| • | | | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | | | |
| TITLE | MGRM | | | | |
| NAME | VHBM, LLC | | | | |
| STREET ADDRESS | 9095 S.W. 87 AVENUE, SUITE 777 | | | | |
| CITY-ST-ZIP | MIAMI, FL 33176 | | | | |
| TITLE | MGRM | | | | |
| NAME | VHBS, LLC | | | | |
| STREET ADDRESS | 9095 S.W. 87 AVENUE, SUITE 777 | † | | | |
| CITY-ST-ZIP | MIAMI, FL 33176 | | | | |
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| 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. | | | | | |