2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040468

City-St-Zip:

HAUPPAUGE, NY 11788

Entity Name: FLAGLER LIFESTYLE COMMUNITIES, L.L.C.

FILED Mar 13, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 217 N. WESTMONTE DRIVE #1007 C/O MARK ZBOROWSKI ALTAMONTE SPRINGS, FL 32714 **New Mailing Address: Current Mailing Address:** 217 N. WESTMONTE DRIVE #1007 ALTAMONTE SPRINGS, FL 32714 FEI Number: 20-0302216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRAY A, N. DWAYNE ESQ. 201 EAST PINE STREET SUITE 500 ORLANDO, FL 32801 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete ZBOROWSKI, MARK Name: Name: Address: 271 MADISON AVE. SUITE 1400 Address: City-St-Zip: NEW YORK, NY 10016 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: CASSATA, ROSARIO Name: Address: 200 WEST MAIN STREET SUITE 102 Address: City-St-Zip: BABYLON, NY 11702 City-St-Zip: Title: MGR () Delete Title: () Change () Addition HEINLEIN, GEORE Name: Name: 888 VETERANS MEMORIAL HIGHWAY Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

City-St-Zip:

SIGNATURE: MARK A ZBOROWSKI MGR 03/13/2007