2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040468

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

Jul 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

217 N. WESTMONTE DRIVE #1007 217 N. WESTMONTE DRIVE #1007

C/O MARK ZBOROWSKI C/O MARK ZBOROWSKI

ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address: **Current Mailing Address:**

8470 ENTERPRISE CIRCLE 217 N. WESTMONTE DRIVE

#1007 SUITE 201

ALTAMONTE SPRINGS, FL 32714 LAKEWOOD RANCH, FL 34202 US

FEI Number: 20-0302216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRAY A, N. DWAYNE ESQ. PFLUGNER, J GEOFFREY ESQ. 201 EAST PINE STREET SUITE 500 8470 ENTERPRISE CIRCLE ORLANDO, FL 32801 SUITE 201

LAKEWOOD RANCH, FL 34202 US

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: J GEOFFREY PFLUGNER 07/17/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change () Addition Name: Name:

ZBOROWSKI, MARK CASSATA, ROSARIO S

271 MADISON AVE. SUITE 1400 Address: 200 WEST MAIN STREET SUITE 102 Address:

City-St-Zip: NEW YORK, NY 10016 City-St-Zip: BABYLON, NY 11702 US

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: CASSATA, ROSARIO Name: HEINLEIN, GEORGE Address: 200 WEST MAIN STREET SUITE 102 Address:

888 VETERANS MEMORIAL HIGHWAY City-St-Zip: HAUPPAUGE, NY 11788 US

BABYLON, NY 11702 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition HEINLEIN, GEORE Name: Name:

888 VETERANS MEMORIAL HIGHWAY Address: Address: City-St-Zip: HAUPPAUGE, NY 11788 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: GEORGE HEINLEIN 07/17/2008