

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042900

FILED  
Apr 11, 2005  
Secretary of State

Entity Name: THE HARBORS AT TOWN N COUNTRY LLC

## Current Principal Place of Business:

8313 W. HILLSBOROUGH AVE., STE. 150  
TAMPA, FL 33615

## New Principal Place of Business:

101 PHILIPPE PARKWAY  
208  
SAFETY HARBOR, FL 34695

## Current Mailing Address:

8313 W. HILLSBOROUGH AVE., STE. 150  
TAMPA, FL 33615

## New Mailing Address:

PO BOX 1003  
SAFETY HARBOR, FL 34695

FEI Number: 20-0367705

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KAGAN, EDWIN B  
2709 ROCKY POINT DR, STE. 102  
TAMPA, FL 33607 US

## Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGRM ( ) Delete  
Name: TURNER, JUSTIN  
Address: 8313 W. HILLSBOROUGH AVE., STE. 150  
City-St-Zip: TAMPA, FL 33615

Title: MGRM ( ) Delete  
Name: SUTHERLAND, JOSEPH  
Address: 8313 W. HILLSBOROUGH AVE., STE. 150  
City-St-Zip: TAMPA, FL 33615

Title: MGRM ( ) Delete  
Name: MOLEY, ANTHONY  
Address: 8313 W. HILLSBOROUGH AVE., STE. 150  
City-St-Zip: TAMPA, FL 33615

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: TURNER, JUSTIN  
Address: 101 PHILIPPE PARKWAY, SUITE 208  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: MGRM (X) Change ( ) Addition  
Name: SUTHERLAND, JOSEPH  
Address: 585 S. RONALD REAGAN BOULEVARD, SUITE 133  
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM (X) Change ( ) Addition  
Name: MOLEY, ANTHONY  
Address: 4201 W. WATERS AVENUE  
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JUSTIN L. TURNER

MGRM

04/11/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date