


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 A
Secretary of State

DOCUMENT # L04000014416 1. Entity Name SAN SIMEON VILLAGE LLC	
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Principal Place of Business 230 PALERMO AVENUE CORAL GABLES, FL 33134	Mailing Address 230 PALERMO AVENUE CORAL GABLES, FL 33134
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DO NOT WRITE IN THIS SPACE



03122008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4933672	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent KORGE, CHRISTOPHER G 230 PALERMO AVENUE CORAL GABLES, FL 33134

**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 the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____


**FILE NOW!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGRM KORGE, CHRISTOPHER G 230 PALERMO AVENUE MIAMI, FL 33134
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05/01/08-80053-016 138.75

**DO NOT WRITE
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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.

SIGNATURE:  **4/15/08** **305-444-9533**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Displaying Phone #