

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000018078

FILED  
Sep 01, 2005  
Secretary of State

**Entity Name:** SULLIVAN HOMES AT MOSS ROSE, LLC

**Current Principal Place of Business:**

5 DELANO LANE  
STUART, FL 34996

**New Principal Place of Business:**

8442 S. FEDERAL HWY  
PORT ST. LUCIE, FL 34952

**Current Mailing Address:**

5 DELANO LANE  
STUART, FL 34996

**New Mailing Address:**

8442 S. FEDERAL HWY  
PORT ST. LUCIE, FL 34952

FEI Number: 65-1056781      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:**

LICKSTEIN, FRED K ESQ  
100 S.E. 2ND ST, 17TH FLOOR  
MIAMI, FL 33131      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/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SULLIVAN, KEVIN  
Address: 5 DELANO LANE  
City-St-Zip: STUART, FL 34996

Title: MGR      ( ) Delete  
Name: MAYS, R. DANIEL  
Address: 5 DELANO LANE  
City-St-Zip: STUART, FL 34996

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: SULLIVAN, KEVIN  
Address: 8442 S. FEDERAL HWY  
City-St-Zip: PORT ST LUCIE, FL 34952

Title: MGR      (X) Change ( ) Addition  
Name: MAYS, R. DANIEL  
Address: 8442 S. FEDERAL HWY  
City-St-Zip: PORT ST. LUCIE, FL 34952

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: KEVIN J. SULLIVAN

PRES

09/01/2005

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