

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021641

FILED
Mar 19, 2008
Secretary of State

Entity Name: SUNTREE BOULEVARD OFFICES, LLC

Current Principal Place of Business:

1311 BEDFORD DRIVE
SUITE 1
MEBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

1311 BEDFORD DRIVE
SUITE 1
MEBOURNE, FL 32940

New Mailing Address:

FEI Number: 20-0894403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, CHRISTOPHER J ESQUIRE
1311 BEDFORD DRIVE
SUITE 1
MELBOURNE, FL 32940 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: MGRM () Delete
Name: COLEMAN INVESTMENTS,, LLC
Address: 1311 BEDFORD DRIVE, SUITE 1
City-St-Zip: MELBOURNE, FL 32940

Title: MGRM () Delete
Name: LEWIS FAMILY INVESTM, ENTS, INC.
Address: 971 E. EAU GALLIE BLVD., SUITE D
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MGRM () Delete
Name: TROPICAL BUILDERS OF, BREVARD, LLC
Address: 4007 N. HARBOR CITY BLVD. #404
City-St-Zip: MELBOURNE, FL 32935 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CHRISTOPHER J. COLEMAN

MGRM

03/19/2008

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