

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000025161

FILED
Jun 30, 2005
Secretary of State

Entity Name: CAMP BISCAYNE AT THE GROVE, L.L.C.

Current Principal Place of Business:

2742 BISCAYNE BLVD.
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

2742 BISCAYNE BLVD.
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: 20-0953618 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:

MATZ, RUBEN
2742 BISCAYNE BLVD.
MIAMI, FL 33137 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MATZ, RUBEN
Address: 2742 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137 US

Title: MGRM () Delete
Name: MATZ, ISAAC
Address: 2742 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137 US

Title: MGRM (X) Delete
Name: MATZ, GLADYS
Address: 2742 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137 US

Title: MGRM (X) Delete
Name: MATZ, SARAH
Address: 2742 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: MATZ, GLADYS
Address: 2742 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137 US

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 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: RUBEN MATZ

MGRM

06/30/2005

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