

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000030342

1. Entity Name
SILVER RESIDENTIAL EQUITY, LLC



Principal Place of Business
1001 E TELECOM DR
BOCA RATON, FL 33431

Mailing Address
1001 E TELECOM DR
BOCA RATON, FL 33431

DO NOT WRITE IN THIS SPACE

**FILED
Apr 29, 2008 8:00 am
Secretary of State**

04-29-2008 90027 006 ***138.75



01082008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-1394098	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE CEO
NAME SILVER, LARRY D
STREET ADDRESS 1001 E TELECOM DR
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE MGRM
NAME SILVER CAPITAL, LLC
STREET ADDRESS 1001 E TELECOM DR
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE MGRM
NAME MINNIEAR HOLDINGS, LLC
STREET ADDRESS 1001 E TELECOM DR
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE CEO
NAME SILVER, LARRY D
STREET ADDRESS 1001 E TELECOM DR.
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE P
NAME HIINNEAR, EDWARDO
STREET ADDRESS 1001 E TELECOM DR.
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE CFO
NAME HOLHAUSER, JESSE A
STREET ADDRESS 1001 E TELECOM DR.
CITY-ST-ZIP BOCA RATON, FL 33431

**DO NOT WRITE
IN THIS SPACE**

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:

Jesse A. Holshouser, CFO 04/21/08 (561) 981-5252

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #