


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # L04000058457 1. Entity Name FOREST GROVE APARTMENTS, LLC	
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Principal Place of Business 321 SOUTH 2ND STREET FT. PIERCE, FL 34950	Mailing Address 321 SOUTH 2ND STREET FT. PIERCE, FL 34950
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04252007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 51-0533554	Applied For 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 BECHT, EDWARD W 321 SOUTH SECOND STREET FORT PIERCE, FL 34950
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when renewing)	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BECHT, EDWARD W 321 SOUTH 2ND STREET FT. PIERCE, FL 34950
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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: <u>Edward W. Becht</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<u>Edward W. Becht 4/25/07 772-465-</u> <small>Date Daytime Phone #</small>
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