2007 LIMITED LIABILITY COMPANY

FILED Apr 30, 2007 08:00 All Secretary of State **ANNUAL REPORT** DOCUMENT # L04000061761 LEGACY HOMES AT THE PROMENADE, L.L.C. Principal Place of Business Mailing Address 9350 S. DIXIE HIGHWAY, SUITE 1500 9350 S. DIXIE HIGHWAY, SUITE 1500 MIAMI, FL 33156 MIAMI, FL 33156 CR2E083 (11/05) 04262007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1705940 Not Applicable \$5,00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SEGERDO, FRANK J ESQ 9350 S. DIXIE HIGHWAY, SUITE 1500 MIAMI, FL 33156 IN THIS SPACE LEGA' San 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. SHAWATURE. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee Is \$50.00 Due by May 1, 2007 2.. MANAGING MEMBERS/MANAGERS 9. TITLE LEGACY MANAGEMENT AT THE PROMENADE, L.L.C. NAME STREET ADDRESS 9350 S. DIXIE HIGHWAY, SUITE 1500 CITY-ST-ZIP MIAMI, FL 33156 U00000743744 05/15/07-80120-023 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP PÜLE-NUME STREET ADDRESS DO NOT WRITE CIT - 21 - ZIP -Have ...

IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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 hat 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 unspecified empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Self-Talle ngi ngganian

SINET ANDRESS 0.71-209 inta NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED O TED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #