2007 LIMITED LIABILITY COMPANY

FILED May 01, 2007 08:00 A Secretary of State

ANNUAL REPORT	
DOCUMENT # L04000064891	Г

1. Entity Name CORAL PARKE HOLDINGS, LLC

Principal Place of Business

Mailing Address

2979 PGA BOULEVARD

PALM BEACH GARDENS, FL 33410 US

DO NOT WRITE IN THIS SPACE

2979 PGA BOULEVARD

PALM BEACH GARDENS, FL 33410

04262007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1565660

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

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

ADAMS, SANDRA ESQ. 2979 PGA BOULEVARD PALM BEACH GARDENS, FL 33410

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8. The above named entity submits this statement for the purpose of changing its registered office or re	egistered agent, or both, in the State of Florida. I am familiar with, and accept
the obligations of registered agent.	U00000750965
	V00000750965 05/18/07-80084-004 25.00

SIGNATURE.

STREET ADDRESS CITY-ST-ZIP

9.

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

000000750965 05/18/07-80084-005 25.00

MANAGING MEMBERS/MANAGERS MGRM TITLE HOME QUALITY MANAGEMENT, INC. NAME STREET ADDRESS 2979 PGA BOULEVARD CITY-ST-ZIP PALM BEACH GARDENS, FL 33410 TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP UTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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