

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000090459

FILED
Aug 02, 2005
Secretary of State

Entity Name: FOREST COVE HOMES II, LLC

Current Principal Place of Business:

4131 LAGUNA STREET
CORAL GABLES, FL 33146

New Principal Place of Business:

3400 CORAL WAY
5TH FLOOR
CORAL GABLES, FL 33145

Current Mailing Address:

4131 LAGUNA STREET
CORAL GABLES, FL 33146

New Mailing Address:

3400 CORAL WAY
5TH FLOOR
CORAL GABLES, FL 33145

FEI Number: 20-2005304 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:

REGISTERED AGENTS OF FLORIDA, LLC
100 SOUTHEAST 2ND STREET, SUITE 2900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: MGR () Delete
Name: TRAPAGA CATALA, ROBERTO A
Address: 4131 LAGUNA STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: CABRER, AGUSTIN
Address: 4131 LAGUNA STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: RAMOS, MARIA
Address: 4131 LAGUNA STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: POSE, MANUEL V
Address: 4131 LAGUNA STREET
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TRAPAGA CATALA, ROBERTO A
Address: 3400 CORAL WAY, 5TH FLOOR
City-St-Zip: CORAL GABLES, FL 33145

Title: MGR (X) Change () Addition
Name: CABRER, AGUSTIN
Address: 3400 CORAL WAY, 5TH FLOOR
City-St-Zip: CORAL GABLES, FL 33145

Title: MGR (X) Change () Addition
Name: RAMOS, MARIA
Address: 3400 CORAL WAY, 5TH FLOOR
City-St-Zip: CORAL GABLES, FL 33145

Title: MGR (X) Change () Addition
Name: POSE, MANUEL V
Address: 3400 CORAL WAY, 5TH FLOOR
City-St-Zip: CORAL GABLES, FL 33145

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: ROBERTO TRAPAGA CATALA

MGR

08/02/2005

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