

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092062

FILED
Mar 10, 2005
Secretary of State

Entity Name: COUNTRY PINES DEVELOPMENT GROUP, LLC

Current Principal Place of Business:

1390 BRICKELL AVENUE STE. 200
MIAMI, FL 33131

New Principal Place of Business:

4000 PONCE DE LEON BLVD
470
CORAL GABLES, FL 33146

Current Mailing Address:

1390 BRICKELL AVENUE STE. 200
MIAMI, FL 33131

New Mailing Address:

4000 PONCE DE LEON BLVD
470
CORAL GABLES, FL 33146

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CASTILLO, ALVARO B
1390 BRICKELL AVENUE STE. 200
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/MEMBERS:

Title: MGR () Delete
Name: HEVIA, GONZALO
Address: 1390 BRICKELL AVENUE STE. 200
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: PINTO, JORGE
Address: 1390 BRICKELL AVENUE STE. 200
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JORGE PINTO MGR 03/10/2005

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