## **2008 LIMITED LIABILITY COMPANY**

## Apr 07, 2008 08:00 All Secretary of State **ANNUAL REPORT** DOCUMENT # L04000092076 THE VERDE HEIGHTS OF FLORIDA LLC Principal Place of Business Mailing Address 951 SOUTHWEST 4TH AVENUE 951 SOUTHWEST 4TH AVENUE BOCA RATON, FL 33432 BOCA RATON, FL 33432 03142008 No Chg-LLC CR2E083 (12/07) Applied For 4. FE! Number 65-0481090 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE BLAKESBERG, JON 951 SOUTHWEST 4TH AVENUE INTHIS SPACE BOCA RATON, FL 33432 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \*\* FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGRM TITLE RED ROCK DEVELOPMENT, LLC NAME STREET ADDRESS P.O. BOX 856 CITY-ST-ZIP **SEDONA, AZ 86339** TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 hability 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 BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

**FILED**