2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000005121

1. Entity Name
LAUDERDALE-DELL LAKE VILLAGE, LLC

Principal Place of Business	Mailing Address
850 SW MARTIN DOWNS BLVD. PALM CITY, FL 34990	P.O. BOX 359 STUART, FL 34995

DO NOT WRITE IN THIS SPACE

01122007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-2161032	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GARRIS, STANLEY R
850 SW MARTIN DOWNS BLVD.
PALM CITY, FL 34990

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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_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	GARRIS, STANLEY R
STREET ADDRESS	850 SW MARTIN DOWNS BLVD.
CITY-ST-ZIP	PALM CITY, FL 34990
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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02/20/07-80017-025 50.00

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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: _Stanley R. Garris_   Stanley R. Garris   2/9/2007   772-287-1844

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #