# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jan 29, 2007 08:00 AM**
**Secretary of State**

DOCUMENT # L05000005634

1. Entity Name
FISHER ISLAND REAL ESTATE, LLC

| Principal Place of Business | Mailing Address |
|---|---|
| ONE FISHER ISLAND DRIVE<br>FISHER ISLAND, FL 33109 | ONE FISHER ISLAND DRIVE<br>FISHER ISLAND, FL 33109 |

DO NOT WRITE IN THIS SPACE

01082007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-2258284
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DE LA CRUZ, LUIS F
95 MERRICK WAY STE 440
CORAL GABLES, FL 33134

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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**

U00000607645
01/31/07-80045-024 50.00

| 9. | MANAGING MEMBERS/MANAGERS |
|---|---|
| TITLE | MGR |
| NAME | FISHER ISLAND INVESTMENTS, INC. |
| STREET ADDRESS | ONE FISHER ISLAND DRIVE |
| CITY-ST-ZIP | FISHER ISLAND, FL 33109 |
| TITLE | MGR |
| NAME | WINICK, PHYLLIS |
| STREET ADDRESS | ONE FISHER ISLAND DRIVE |
| CITY-ST-ZIP | FISHER ISLAND, FL 33109 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
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| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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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:** _____ 1.9.07 (305)535-6071
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #