## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000006579

Entity Name: ELIZABETH PLACE APARTMENTS L.L.C.

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8098 W. 15TH CT. 8098 W. 15 CT HIALEAH, FL 33014 HIALEAH, FL 33014

Current Mailing Address: New Mailing Address:

P.O. BOX 2382 8098 W. 15 CT. STUART, FL 349952382 HIALEAH, FL 33014

FEI Number: 86-1128022 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CRAWFORD, KENT D 8098 W. 15TH CT. HIALEAH, FL 33014 US

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:

City-St-Zip:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

HIALEAH, FL 33014

Title: MGRM () Delete
Name: CRAWFORD, DOUGLAS K
Address: 612 S.W. ABODE AVE.

Address: 612 S.W. ABODE AVE. City-St-Zip: PORT ST. LUCIE, FL 34953

Title: MGRM () Delete
Name: CRAWFORD, KENT D
Address: 8098 W. 15TH CT.

Title: MGRM (X) Change () Addition
Name: CRAWFORD, DOUGLAS K
Address: 1620 SW PROSPERITY WAY
City-St-Zip: PALM CITY, FL 34990

Title: ( ) Change ( ) Addition

Name: Address: City-St-Zip:

ADDITIONS/CHANGES:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: KENT D. CRAWFORD MGRM 04/24/2006