

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000015093

Entity Name: FLORENTINE APARTMENTS, LLC

FILED  
Jan 04, 2007  
Secretary of State

**Current Principal Place of Business:**

19722 GULF BLVD.  
INDIAN SHORES, FL 33785

**New Principal Place of Business:**

**Current Mailing Address:**

19722 GULF BLVD.  
INDIAN SHORES, FL 33785

**New Mailing Address:**

FEI Number: 20-2290717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALDRICH, LYLE  
19722 GULF BLVD.  
INDIAN SHORES, FL 33780 US

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

ALDRICH, LYLE  
19722 GULF BLVD.  
INDIAN SHORES, FL 33785 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:

01/04/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ALDRICH, LYLE  
Address: 19722 GULF BLVD.  
City-St-Zip: INDIAN SHORES, FL 33780

Title: MGRM ( ) Delete  
Name: ALDRICH, LEE  
Address: 800 MITCHELL YOUNG RD  
City-St-Zip: MONTGOMERY, AL 36108

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ALDRICH, LYLE  
Address: 19722 GULF BLVD.  
City-St-Zip: INDIAN SHORES, FL 33785

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 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: LYLE R. ALDRICH

MM/M

01/04/2007

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