## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000018963

Entity Name: FLORIDA HOME TRUST REALTY LLC

FILED May 03, 2006 Secretary of State

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

4801 S. UNIVERSITY DR. 4801 S UNIVERSITY DRIVE SUITE 127

2200 DAVIE, FL 33328 LIS DAVIE, FL 33328

**Current Mailing Address: New Mailing Address:** 

4801 S UNIVERSITY DRIVE SUITE 127 4801 S. UNIVERSITY DR.

2200 **DAVIE, FL 33328** US DAVIE, FL 33328

FEI Number: 20-2388790 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SALAS, FRANCISCO SALAS, FRANCISCO 4801 S. UNIVERSITY DR. 4801 S UNIVERSITY DRIVE SUITE 127

2200 DAVIE, FL 33328 US DAVIE, FL 33328 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: JULIO CARBONEL 05/03/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change ( ) Addition

SALAS, FRANCISCO SALAS, FRANCISCO Name: Name: 4801 S. UNIVERSITY # 2200 Address: 4801 S UNIVERSITY DRIVE SUITE 127 Address:

City-St-Zip: DAVIE, FL 33328 City-St-Zip: DAVIE, FL 33328

Title: MGR () Delete Title: (X) Change ( ) Addition CARBONELL, JULIO

CARBONELL, JULIO Name: Name: Address: 4801 S.UNIVERSITY DR. # 2200 Address:

4801 S UNIVERSITY DRIVE SUITE 127

City-St-Zip: **DAVIE, FL 33328** City-St-Zip: DAVIE, FL 33328 US

Title: MGR () Delete Title: MGR (X) Change ( ) Addition PAN, CARLOS Name: PAN, CARLOS Name:

4801 S UNIVERSITY DRIVE SUITE 127 4801 S. UNIVERSITY DR. #2200 Address: Address:

City-St-Zip: **DAVIE, FL 33328** City-St-Zip: DAVIE, FL 33328 US

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: JULIO CARBONEL 05/03/2006