2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 04, 2008
Secretary of State

DOCUMENT# L05000036598

Entity Name: HOMESTEAD APARTMENTS, LLC

Current Principal Place of Business:

9481 SW 109 TERRACE
MIAMI, FL 331763639 US

New Principal Place of Business:

Current Mailing Address:

9481 SW 109 TERRACE
MIAMI, FL 331763639 US

New Mailing Address:

FEI Number: 71-0980846 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORTADA, RAMON X SR.
9481 SW 109 TERRACE
MIAMI, FL 331763639 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM ( ) Delete	
Name:	TELLECHEA, JORGE A MGRM	
Address:	9481 SW 109 TERRACE	
City-St-Zip:	MIAMI, FL 33176 US	
Title:	MGRM ( ) Delete	
Name:	CORTADA DE FORTUNY, MARIA A MGRM	
Address:	RIVADAVIA 2678, 6TO.	
City-St-Zip:	BUENOS AIRES-1034, ARGENTINA, BA 1034 AR	
Title:	MGRM ( ) Delete	
Name:	CORTADA, JILL M MGRM	
Address:	1322 TWILIGHT RIDGE	
City-St-Zip:	SAN ANTONIO, TX 78258 US	
Title:	MGRM ( ) Delete	
Name:	GABARONI, ALICIA S MGRM	
Address:	8055 SW 156 TERRACE	
City-St-Zip:	PALMETTO BAY, FL 33157 US	
Title:	MGRM ( ) Delete	
Name:	GABARONI, JOSE M	
Address:	8055 SW 156 TERRACE	
City-St-Zip:	PALMETTO BAY, FL 33157 US	
Title:	MGRM ( ) Delete	
Name:	CORTADA, JOAQUIN A MGRM	
Address:	9481 SW 109 TERRACE	
City-St-Zip:	MIAMI, FL 33176 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: RAMON X. CORTADA, SR. MGRM 03/04/2008

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