2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCÚMENT # L05000038071

1. Entity Name

THREE FOUNTAINS OF VIERA, LLC



Principal Place of Business

7301 SW 57 COURT

SUITE 565 SOUTH MIAMI, FL 33143 Mailing Address

7301 SW 57 COURT

SUITE 565

SOUTH MIAMI, FL 33143

FILED Jun 22, 2007 8:00 am Secretary of State

05-18-2007 90220 011 ****50.00

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05032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROLLNICK, NEIL S ESQ 2525 PONCE DE LEON BLVD., SUITE 400 MIAMI, FL 33134

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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
Signature, hybrid or privated rame of registered agent and title if applicable (NOTE: Registered Agent signature required when renstating)

DATE

Filling Fee Is \$50.00

Due by September 14, 2007

MANAGERS

3.	MANAGING WEMBERS/MANAGERS
TITLE	MGRM
NAME	THE VILLAS AT VIERA CORP.
STREET ADDRESS	7301 SW 57 COURT 565
CITY-ST-ZIP	SOUTH MIAMI, FL 33143
TITLE	-
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CITY-ST-ZIP	
11. I hereby certify that the information supplied with this filing does not quality for the ex	

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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 fiability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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Destine Phone #