

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000042305

Entity Name: ADLER SEMORAN GP, LLC

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

1400 N.W. 107TH AVE., 5TH FLOOR
MIAMI, FL 33172

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

1400 N.W. 107TH AVE., 5TH FLOOR
MIAMI, FL 33172

New Mailing Address:

FEI Number: 76-0790672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADLER, LINDA ESQ.
C/O ADLER DEVELOPMENT, INC.
1400 N.W. 107TH AVE., 5TH FLOOR
MIAMI, FL 33172 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: ADLER, MICHAEL M
Address: 1400 N.W. 107TH AVE., 5TH FLOOR
City-St-Zip: MIAMI, FL 33172

Title: PCEO () Delete
Name: ADLER, MICHAEL M
Address: 1400 NW 107 AVENUE
City-St-Zip: MIAMI, FL 33172

Title: EVAS () Delete
Name: LEVY, JOEL
Address: 1400 NW 107 AVENUE
City-St-Zip: MIAMI, FL 33172

Title: T () Delete
Name: LEVY, JOEL
Address: 1400 NW 107 AVENUE
City-St-Zip: MIAMI, FL 33172

Title: VP () Delete
Name: MARTINEZ, JOSE
Address: 1400 NW 107 AVENUE
City-St-Zip: MIAMI, FL 33172

Title: S () Delete
Name: ADLER, LINDA K
Address: 1400 NW 107 AVENUE
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES:

Title: MGRP (X) Change () Addition
Name: ADLER, MICHAEL M
Address: 1400 N.W. 107TH AVE., 5TH FLOOR
City-St-Zip: MIAMI, FL 33172

Title: EV (X) Change () Addition
Name: ADLER, MATTHEW L
Address: 1400 NW 107 AVENUE
City-St-Zip: MIAMI, FL 33172

Title: EVT (X) Change () Addition
Name: LEVY, JOEL
Address: 1400 NW 107 AVENUE
City-St-Zip: MIAMI, FL 33172

Title: EV (X) Change () Addition
Name: HARRIS, BRETT W
Address: 1400 NW 107 AVENUE
City-St-Zip: MIAMI, FL 33172

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: LINDA K ADLER

S

04/27/2007

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