

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054428

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: EMERALD LAKES OF COCOA LLC

**Current Principal Place of Business:**

5580 STATE ROAD 524  
COCOA, FL 32926

**New Principal Place of Business:**

**Current Mailing Address:**

1474-A WEST 84 STREET  
HIALEAH, FL 33014 US

**New Mailing Address:**

FEI Number: 36-4575812

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DUKE, DANIEL A JR  
8410 WHISPERING OAKS WAY  
WEST PALM BEACH, FL 33411 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: MGR ( ) Delete  
Name: DUKE, DANIEL A JR.  
Address: 8410 WHISPERING OAKS WAY  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: MGR ( ) Delete  
Name: MAIRE, JOHNNIE L  
Address: 5580 STATE ROAD 524  
City-St-Zip: COCOA, FL 32926

Title: MGR ( ) Delete  
Name: OSMAN, CRAIG A  
Address: 17415 NW 85 AVE.  
City-St-Zip: HIALEAH, FL 33015 US

Title: MGR ( ) Delete  
Name: OSMAN, L. MICHAEL  
Address: 1474 -A WEST 84 STREET  
City-St-Zip: HIALEAH, FL 33014 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:

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: L MICHAEL OSMAN

MGR

04/29/2009

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