

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059009

FILED
Jun 30, 2008
Secretary of State

Entity Name: BOCA ESTATE BUILDERS, LLC

Current Principal Place of Business:

ONE SOUTH OCEAN BLVD
STE. 324
BOCA RATON, FL 33432 US

New Principal Place of Business:

4400 N FEDERAL HWY.
STE. 410
BOCA RATON, FL 33431 US

Current Mailing Address:

ONE SOUTH OCEAN BLVD
STE. 324
BOCA RATON, FL 33432 US

New Mailing Address:

4400 N FEDERAL HWY.
STE. 410
BOCA RATON, FL 33431 US

FEI Number: 20-3735998 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:

COLOMBO, ANDRE J
ONE SOUTH OCEAN BLVD
STE. 324
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

COLOMBO, ANDRE J
4400 N FEDERAL HWY
STE 410
BOCA RATON, FL 33431 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: ANDRE COLOMBO

06/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLOMBO, ANDRE J
Address: ONE SOUTH OCEAN BLVD., STE 324
City-St-Zip: BOCA RATON, FL 33432 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COLOMBO, ANDRE J
Address: 4400 N FEDERAL HWY., STE. 410
City-St-Zip: BOCA RATON, FL 33431 US

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: ANDRE COLOMBO

MGRM

06/30/2008

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