2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT #L05000059945

1. Entity Name SAVÁNNA VIEW, L.L.C.



FILED Feb 16, 2007 08:00 AM **Secretary of State**

Principal Place of Business

Mailing Address

5801 CONGRESS AVENUE BOCA RATON, FL 33487

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02062007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	20-3007414

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MOMBACH, GEOFFREY S ESQ. C/O MOMBACH, BOYLE & HARDIN, P.A. 500 EAST BROWARD BLVD., SUITE 1950 FT. LAUDERDALE, FL 33394

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8. 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, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent eignature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2007		U90000638492 02/27/07-80029-020 50.00	

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	WOLF, STEVE
STREET ADDRESS	5801 CONGRESS AVE
CITY-ST-ZIP	BOCA RATON, FL 33487
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information faccurate 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 everyor trustee empowered to execute this report as required by Chapter 608, Florida Statutes. I hereby certify that the information indicated on this report is true and limited liability company or the recommendation.

SIGNATURE:

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

Steve Wolf 2/12/07