

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060415

Entity Name: 4644 POINCIANA, L.L.C.

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

334 EASTLAKE ROAD
PALM HARBOR, FL 34685

New Principal Place of Business:

Current Mailing Address:

334 EASTLAKE ROAD
PALM HARBOR, FL 34685

New Mailing Address:

FEI Number: 20-3020575 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:

VINCI, THOMAS F
334 EASTLAKE RD #216
PALM HARBOR, FL 34685 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: VINCI, THOMAS F
Address: 334 EASTLAKE ROAD
City-St-Zip: PALM HARBOR, FL 34685

Title: MGR () Delete
Name: VINCI, GERARD T
Address: 3200 N. OCEAN BLVD., #706
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: MGR () Delete
Name: SAAR, PAUL
Address: 258 COMMERCIAL BLVD., SUITE 2-A
City-St-Zip: FT. LAUDERDALE, FL 33308

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:

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: THOMAS F. VINCI

MR

05/02/2007

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