2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000068170

1. Entity Name
THE GRAND RESERVE CONDOMINIUMS AT TAMPA, LLC

Principal Place of Business	Mailing Address
2 ALHAMBRA PLAZA, SUITE 860 CORAL GABLES, FL 33134	2 ALHAMBRA PLAZA, SUITE 860 CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

01092007No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-3139694
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

VILA, OSCAR J III
2 ALHAMBRA PLAZA, SUITE 860
CORAL GABLES, FL 33134

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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	PADRON, CARLOS E
STREET ADDRESS	2 ALHAMBRA PLAZA, SUITE 860
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	MGR
NAME	VILA, OSCAR J
STREET ADDRESS	2 ALHAMBRA PLAZA, SUITE 860
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/22/07-80065-016 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate, 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____ 1/18/07 305-461-4888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #