2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2007
Secretary of State

DOCUMENT# L05000079318

Entity Name: PRESIDENTIAL CAPITAL HIGHLANDS, LLC

Current Principal Place of Business:

1200 S. PINE ISLAND ROAD, SUITE 200
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

1200 S. PINE ISLAND ROAD, SUITE 200
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 20-3294064 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHATZ, RICHARD E
STEARNS WEAVER MILLER WIESSLER ET AL
150 WEST FLAGLER STREET, SUITE 2200
MIAMI, FL 33130 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: MR ( ) Delete
Name: RICHARD, MONDRE
Address: 1200 S PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33324

Title: MR ( ) Delete
Name: DAVID, EPSTEIN
Address: 1200 S PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: MR (X) Change ( ) Addition
Name: RICHARD, MONDRE
Address: 1200 S PINE ISLAND ROAD, SUITE 200
City-St-Zip: PLANTATION, FL 33324

Title: MR (X) Change ( ) Addition
Name: DAVID, EPSTEIN
Address: 1200 S PINE ISLAND ROAD, SUITE 200
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD MONDRE MR. 04/10/2007

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