


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 03, 2007 8:00 am
Secretary of State

04-03-2007 90121 045 ****50.00

DOCUMENT # L05000081944 1. Entity Name CENTERLINE HOMES AT COQUINA COVE, LLC	
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Principal Place of Business 825 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33071 US	Mailing Address 825 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33071 US
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01222007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3335045	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

LEOPOLD, KORN & LEOPOLD, P.A.
20801 BISCAYNE BLVD.
SUITE 501
AVENTURA, FL 33180

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CENTERLINE HOMES, INC. 825 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33071
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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:

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

3/19/07

Date

954-344-8040

Daytime Phone #