

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 27, 2007  
Secretary of State**

DOCUMENT# L05000088321

Entity Name: FALCON ELMHURST VILLAGE, LLC

**Current Principal Place of Business:**

1951 N.W. 19TH STREET STE 200  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

1951 N.W. 19TH STREET STE 200  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 20-3429388      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GERSON, GARY N  
1645 PALM BEACH LAKES BLVD STE 1200  
WEST PALM BEACH, FL 33401      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:            MBR            ( ) Delete  
Name:            FALCONE, ARTHUR  
Address:        1951 NW 19TH STREET SUITE 200  
City-St-Zip:    BOCA RATON, FL 33431

Title:            MBR            ( ) Delete  
Name:            FALCONE, ARTHUR  
Address:        1951 NW 19TH STREET SUITE 200  
City-St-Zip:    BOCA RATON, FL 33431

**ADDITIONS/CHANGES:**

Title:            M            (X) Change ( ) Addition  
Name:            FALCONE, ARTHUR  
Address:        1951 NW 19TH STREET SUITE 200  
City-St-Zip:    BOCA RATON, FL 33431

Title:            M            (X) Change ( ) Addition  
Name:            FALCONE, EDWARD  
Address:        1951 NW 19TH STREET SUITE 200  
City-St-Zip:    BOCA RATON, FL 33431

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: ARTHUR FALCONE

M

04/27/2007

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