

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000088778

FILED
Apr 24, 2007
Secretary of State

Entity Name: PINE GROVE PLANTATION DEVELOPERS, LLC

Current Principal Place of Business:

1015 NORTH STATE ROAD 7
SUITE C
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

700 NW 107 AVENUE
SUITE 400
MIAMI, FL 33172

Current Mailing Address:

700 NW 107TH AVENUE
SUITE 400
MIAMI, FL 33172

New Mailing Address:

FEI Number: 20-3433536 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: LENNAR HOMES, INC.,
Address: 700 NW 107TH AVENUE, SUITE 400
City-St-Zip: MIAMI, FL 33172

Title: MBR () Delete
Name: PINE GROVE PLANTATIO, N, LLC
Address: 4501 BEVERLY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LENNAR HOMES, LLC,
Address: 3020 HARTLEY ROAD, SUITE 100
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGRM (X) Change () Addition
Name: PINE GROVE PLANTATIO, N, LLC
Address: 4501 BEVERLY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

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: LENNAR HOMES

MGRM

04/24/2007

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