2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2007
Secretary of State

DOCUMENT# L05000112255

Entity Name: ZOHN FAMILY RESIDENCE, LLC

Current Principal Place of Business:

255 ARAGON AVENUE, SUITE 300A
CORAL GABLES, FL 33134

New Principal Place of Business:

355 ALHAMBRA CIRCLE SUITE 1500
CORAL GABLES, FL 33134

Current Mailing Address:

255 ARAGON AVENUE, SUITE 300A
CORAL GABLES, FL 33134

New Mailing Address:

355 ALHAMBRA CIRCLE SUITE 1500
CORAL GABLES, FL 33134

FEI Number: 20-4257212 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAGG, K. LAWRENCE
200 S. BISCAYNE BOULEVARD, SUITE 4900
MIAMI, FL 33131 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: ZOHN, FRANK M
Address: 9999 FAIRCHILD WAY
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES:

Title: MR. (X) Change ( ) Addition
Name: ZOHN, FRANK M
Address: 355 ALHAMBRA CIRCLE SUITE 1500
City-St-Zip: CORAL GABLES, FL 33134

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: FRANK M. ZOHN MR 02/08/2007

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