

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 10, 2007 8:00 am
Secretary of State

04-10-2007 90081 018 ****50.00

DOCUMENT # L05000114020

1. Entity Name

PREMIER COMMUNITIES FLORIDA ACQUISITION LLC



Principal Place of Business

**23800 WEST TEN MILE ROAD, SUITE 220
SOUTHFIELD, MI 48034**

Mailing Address

**23800 WEST TEN MILE ROAD, SUITE 220
SOUTHFIELD, MI 48034**

DO NOT WRITE IN THIS SPACE



01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

20-4031932

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

**TITLE MGR
NAME COHEN, WALTER
STREET ADDRESS 23800 WEST TEN MILE ROAD, SUITE 220
CITY-ST-ZIP SOUTHFIELD, MI 48034**

**TITLE MGR
NAME FRIEDMAN, DAVID
STREET ADDRESS 23800 WEST TEN MILE ROAD, SUITE 220
CITY-ST-ZIP SOUTHFIELD, MI 48034**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

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STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIP**

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IN THIS SPACE**

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

Date

Daytime Phone #