2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000119628

1. Entity Name
JENSEN BEACH PROPERTIES, LLC



Principal Place of Business

SIGNATURE:

450 E LAS OLAS BLVD STE 1500 FORT LAUDERDALE, FL 33301 Mailing Address

450 E LAS OLAS BLVD STE 1500 FORT LAUDERDALE, FL 33301

FILED Apr 26, 2007 8:00 am Secretary of State

04-26-2007 90043 001 ****50.00



01102007 No Chg-LLC

CR2E083 (11/05)

Daytime Phone #

4. FEI Number	Applied For	For
20-4056578	Not Applicab	_
5. Certificate of Status Desired	\$5.00 Additional	

6. Name and Address of Current Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC. 500 E. BROWARD BLVD., SUITE 1400 FORT LAUDERDALE, FL 33394

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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 il applicable.	(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 HUIZENGA HOLDINGS INC 450 E LAS OLAS BLVD 1500 FORT LAUDERDALE, FL 33301				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WE	RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPA	ACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
11. I hereby certify that the information supplied with this filling 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.					

Cris V. Branden

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