

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025755

Entity Name: ISLAMORADA VILLAS, LLC

FILED  
Jul 23, 2008  
Secretary of State

## Current Principal Place of Business:

211 N.W. 29TH COURT  
FT. LAUDERDALE, FL 33311

## New Principal Place of Business:

## Current Mailing Address:

211 N.W. 29TH COURT  
FT. LAUDERDALE, FL 33311

## New Mailing Address:

370 E. MAPLE ROAD  
3RD FLOOR  
BIRMINGHAM, MI 48009

FEI Number: 20-4475640      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

RIVERSTONE COMMUNITIES, LLC  
2121 NW 29TH CT  
FT. LAUDERDALE, FL 33311      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: MGRM ( ) Delete  
Name: BELLINSON, JAMES  
Address: 4710 ARDMORE DR  
City-St-Zip: BLOOMFIELD HILLS, MI 48302

Title: MGRM ( ) Delete  
Name: PETERSON, DOUGLAS  
Address: 19000 SW 54TH PLACE  
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: MGRM ( ) Delete  
Name: DABKOWSKI, GARY  
Address: 44440 MIDWAY DR  
City-St-Zip: NOVI, MI 48375

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GARY F. DABKOWSKI

CFO

07/23/2008

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