## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000068740

Name:

Entity Name: FLORIDA PROPERTIES OF PORT ST. LUCIE, LLC

FILED Mar 30, 2007 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business:

18302 HIGHWOODS PRESERVE PARKWAY STE 114 18302 HIGHWOOD PRESERVE PARKWAY STE 114 TAMPA, FL 33647

TAMPA, FL 33647

**Current Mailing Address: New Mailing Address:** 

18302 HIGHWOOD PRESERVE PARKWAY STE 114 18302 HIGHWOODS PRESERVE PARKWAY STE 114

TAMPA, FL 33647 TAMPA, FL 33647

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MARQUARDT, EMIL C JR BROCK, JAMES C 625 COURT STREET STE 200 7065 WESTPOINTE BOULEVARD CLEARWATER, FL 33756 #317

ORLANDO, FL 32835 US

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: JAMES C. BROCK 03/30/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: (X) Change ( ) Addition () Delete

COHEN, ROBERT COHEN, ROBERT M Address: 18302 HIGHWOOD PRESERVE PARKWAY STE 114 Address: 18302 HIGHWOOD PRESERVE PARKWAY STE 114

Name:

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: ROBERT M. COHEN 03/30/2007