

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083337

FILED
Apr 02, 2008
Secretary of State

Entity Name: THE GARDENS AT MILLENIA BOULEVARD, LLC

Current Principal Place of Business:

2450 MAITLAND CENTER PARKWAY
300
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

2450 MAITLAND CENTER PARKWAY
300
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 20-5432241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELIAS, ADIL R
2450 MAITLAND CENTER PARKWAY
300
MAITLAND, FL 32751 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: MGR () Delete
Name: ELIAS, ADIL R
Address: 2450 MAITLAND CENTER PARKWAY, SUITE 300
City-St-Zip: MAITLAND, FL 32751

Title: MGR () Delete
Name: ELIAS, AIDA
Address: 2450 MAITLAND CENTER PARKWAY, SUITE 300
City-St-Zip: MAITLAND, FL 32751

Title: MGR () Delete
Name: ELIAS, RONI
Address: 2450 MAITLAND CENTER PARKWAY, SUITE 300
City-St-Zip: MAITLAND, FL 32751

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: DR. ADIL R. ELIAS

MGR

04/02/2008

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