

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090380

Entity Name: ARIZEN HOMES REALTY, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

9 CHIQUITA BLVD NORTH
CAPE CORAL, FL 33993

New Principal Place of Business:

Current Mailing Address:

2700 W CYPRESS CREEK RD, SUITE B-111
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 20-5604417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARIZEN HOMES, INC
2700 W CYPRESS CREEK RD, SUITE B-111
FT. LAUDERDALE, FL 33309 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: OUELLETTE, MICHAEL A
Address: 17887 COURTSIDE LANDINGS CIRCLE
City-St-Zip: PUNTA GORDA, FL 33955

Title: MGR () Delete
Name: ARNEL, TIM
Address: 2824 NE 23RD AVENUE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: MGR () Delete
Name: MARK, EZZO
Address: 2700 W. CYPRESS CREEK RD, SUITE B-111
City-St-Zip: FT. LAUDERDALE, FL 33309

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: TIM ARNEL

MGR

04/30/2007

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