

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000106050

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** GRANDE PALMS AT TRADITION II, LLC

**Current Principal Place of Business:**

1025 KANE CONCOURSE, SUITE 215  
BAY HARBOR ISLANDS, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

1025 KANE CONCOURSE, SUITE 215  
BAY HARBOR ISLANDS, FL 33154

**New Mailing Address:**

**FEI Number:** 71-1017824

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEISBURD, RANDY K  
1025 KANE CONCOURSE, SUITE 215  
BAY HARBOR ISLANDS, FL 33154 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: P  
Name: COHEN, HOWARD D  
Address: 1025 KANE CONCOURSE, SUITE 215  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: ST  
Name: COHEN, KENNETH J  
Address: 1025 KANE CONCOURSE, SUITE 215  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

I hereby 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: KENNETH COHEN

TS

04/27/2010

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