## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000021374

City-St-Zip: NEW PORT RICHEY, FL 34655

Entity Name: PALMCREST HOMES OF TAMPA BAY-XII, LLC

FILED Aug 27, 2009 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:
	HELL BOULEVARD T RICHEY, FL 34655	3717 NORTH B ST. TAMPA, FL 33609
Current M	ailing Address:	New Mailing Address:
P.O. BOX 2197 NEW PORT RICHEY, FL 34656		3717 NORTH B ST. TAMPA, FL 33609
	FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the limited liability Address of Current Registered Agent:	
FLAIG, GUNTHER 7615 MICHELL BLVD. NEW PORT RICHEY, FL 34655 US		HARRIS, CHARLES M JR. 200 CENTRAL AVE. SUITE 1600 ST. PETERSBURG, FL 33701 US
The above in the State	named entity submits this statement for the of Florida.	ne purpose of changing its registered office or registered agent, or both
SIGNATURE: ALEXANDER SULLIVAN		08/27/2009
	Electronic Signature of Registered	Agent Date
MANAGING I	MEMBERS/MANAGERS:	ADDITIONS/CHANGES:
Title: Name: Address: City-St-Zip:	MGRM () Delete FLAIG, GUNTHER 7615 MITCHELL BLVD. NEW PORT RICHEY, FL 34655	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	MGRM () Delete SCHOENBAUM, ADAM 7615 MITCHELL BLVD NEW PORT RICHEY, FL 34655	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address:	MGRM () Delete SULLIVAN, ALEXANDER 7615 MITCHELL BLVD	Title: ( ) Change ( ) Addition Name: Address:

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.

City-St-Zip:

SIGNATURE: ALEXANDER SULLIVAN 08/27/2009