

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000115290

Entity Name: HOMESTEAD LOTS 2008 LLC

FILED  
Feb 18, 2009  
Secretary of State

## Current Principal Place of Business:

TWO ALHAMBRA PLAZA  
PENTHOUSE 1B  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

TWO ALHAMBRA PLAZA  
PENTHOUSE 1B  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 26-3900211

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FIELDSTONE LESTER SHEAR & DENBERG, LLP  
201 ALHAMBRA CIRCLE  
SUITE 601  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

FIELDSTONE, RONALD R  
201 ALHAMBRA CIRCLE  
SUITE 601  
CORAL GABLES, FL 33134 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: RONALD R. FIELDSTONE

02/18/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MARTINEZ, CARLOS E  
Address: 11755 S.W. 90 STREET, SUITE 210  
City-St-Zip: MIAMI, FL 33176

Title: MGR ( ) Delete  
Name: SURIS, ROBERT  
Address: 4949 SW 75TH AVE  
City-St-Zip: MIAMI, FL 33155

## ADDITIONS/CHANGES:

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: ROBERT SURIS

MGR

02/18/2009

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