

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L98000002534

1. Entity Name

COSCAN HOMES REALTY, LLC

FILED

03 MAY 22 PM 1:36

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business 5555 Anglers Avenue Ft. Lauderdale, Florida 33312	Mailing Address 5555 Anglers Avenue Ft. Lauderdale, Florida 33312
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2. Principal Place of Business 5555 Anglers Avenue	3. Mailing Address 5555 Anglers Avenue
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Suite, Apt. #, etc. Suite 1A	Suite, Apt. #, etc. Suite 1A
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DO NOT WRITE IN THIS SPACE

City & State Ft. Lauderdale, Florida	City & State Ft. Lauderdale, Florida	4. FEI Number 65-0873262	Applied For Not Applicable
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Zip 33312	Country US	Zip 33312	Country US	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent Registered Agents of Florida, LLC 100 Southeast Second Street, Suite 3500 Miami, Florida 33131	7. Name and address of New Registered Agent Name Registered Agents of Florida, LLC Street Address (P.O. Box Number is Not Acceptable) 100 S.E. Second Street Suite 2900 City Miami FL Zip 33131
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8. 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

Howard J. Vogel, V.P.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$50.00
Make Check Payable to Department of State
DUE BY MAY 1, 2003**

9. MANAGING MEMBERS/ MEMBERS		10. ADDITIONS/ CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Brookfield Developers Florida, Inc. 5555 Anglers Avenue Ft. Lauderdale, Florida 33312 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Coscan Homes, LLC 5555 Anglers Avenue Ft. Lauderdale, Florida 33312 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Christine Bonelli 1301 North Venetian Way Miami, Florida 33139 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 05/22/03--01098--002 **50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

Albert Piazza

(954) 620-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #