2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

Principal Place of Business S555 Anglers Avenue Ft. Lauderdale, Florida 33312 SECRETARY OF STATE TALL AHASSEE, FLORIDA	DOCUMENT # L9900001297 1. Entity Name						; Rush B. G G ^{est}		
S555 Anglers Avenue	COSCAN OCEAN POINT, LLC						FILED		
2. Principal Place of Business 5555 Anglers Avenue 65-0881074 Applied For Not Applicable 55-0881074 Applied For Not Applicable 7. Name and address of New Registered Agent 8. Name 8. Name and Address of Florida, LLC 100 Southeast Second Street, Suite 3500 Miami, Florida 33131 8. The above named entity submits this statement of the purpose of changing its registered agent, or both, in the State of Florida. Signature, typed or pringiphary Applicable agent and this if applicable. FEE IS \$500 Make Creeck Parable to Obspartment of State 00EBY, MAY, 2003 9. MANAGING MEMBERS MEMBERS MGR Brookfield Developers Florida, L.L.C. 5555 Anglers Avenue Ft. Lauderdale, Florida 33312 TITLE NAME 1 Delete 1 TITLE NAME 1 Delete 1 TITLE NAME 2 Delete 1 TITLE NAME 2 NAME MGR Coscan Developers Florida, L.L.C. 5555 Anglers Avenue Ft. Lauderdale, Florida 33312 TITLE NAME 2 NAME MGR Coscan Developers Florida, L.L.C. 5555 Anglers Avenue Ft. Lauderdale, Florida 33312 TITLE NAME 2 NAME MGR Coscan Developers Florida, L.L.C. 5555 Anglers Avenue Ft. Lauderdale, Florida 33312	5555 Angle	ers Avenue	5555 Anglers Avenue			-	SECRETARY OF STATE:		
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Ft. Lauderdale, Florida Ft. Lauderdale, Flori	Suite 1A		Suite 1A				DO NOT WRITE IN THIS SPACE		
8. Name and Address of Current Registered Agent Registered Agents of Florida, LLC 100 Southeast Second Street, Suite 3500 Miami, Florida 33131 8. The above named entity submits this statement for the purpose of changing its registered dynamic agent and title if applicable. SIGNATURE Manual	1 *		1 .				I.		
Registered Agents of Florida, LLC 100 Southeast Second Street, Suite 3500 Miami, Florida 33131 8. The above named entity submits this statement of the purpose of changing its registered Agent, or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printight high statement of the purpose of changing its registered Agent agrature required when reinstailing) Part				1		5.	Certificate of Status Desired		
Registered Agents of Florida, LLC 100 Southeast Second Street, Suite 3500 Miami, Florida 33131 8. The above named entity submits this statement of the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Howard J. Vogel, V.P.	6. Nar	me and Address of Current			7. Na				
SIGNATURE City Miami Mi	Registered Agents of Florida, LLC 100 Southeast Second Street, Suite 3500 Regist Street Ac 100 S					ess (P.O. Box Number is Not Acceptable)			
8. The above named entity submits this statement to the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Howard J. Vogel, V.P.									
SIGNATURE Howard J. Vogel, V.P. Signature, typed or printiparhamps of rigistered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE PEEIS \$50.00 Make Check Payable to Department (of State 10. ADDITIONS/ CHANGES DUE BY, MAY (1, 2003 10. ADDITIONS/ CHANGES TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete STREET ADDRESS CITY-ST-ZIP DELETE STREET ADDRESS CITY-ST-ZIP STREET AD	,/				Miami				
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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 eport as required by Chapter 608, Florida Statutes.									
SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Albert Piazza 4/22/03 (954) 620-1000 Date Daytime Phone #									