

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 07, 2005 8:00 am
Secretary of State

03-07-2005 90057 006 ****55.00

DOCUMENT # L99000005109					
1. Entity Name UNIVERSITY VILLAGE, L.L.C.					
Principal Place of Business 24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134			Mailing Address 24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134		
2. Principal Place of Business 10801 Corkscrew Rd. Suite, Apt. #, etc. Suite 305 City & State Estero, FL Zip 33928		3. Mailing Address 10801 Corkscrew Road Suite, Apt. #, etc. Suite 305 City & State Estero, FL Zip 33928		02252005 Chg-LLC CR2E083 (10/03)	
Country USA		Country USA		4. FEI Number 65-0981018	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent GESCHWENDT, MARK 24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134			7. Name and Address of New Registered Agent Name <u>Same</u> Street Address (P.O. Box Number is Not Acceptable) 10801 Corkscrew Road Suite 305 City <u>Estero</u> FL Zip Code <u>33928</u>		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>[Signature]</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <u>3/1/05</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MIROMAR DEVELOPMENT CORP. 24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	10801 Corkscrew Road Suite 305 Estero, FL 33928
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				Date <u>3/1/05</u> Daytime Phone # <u>239/948-3666</u>	
University Village, LLC By: Miromar Development Corp Its Managing Member Jerry Schreyer, Executive Vice President					

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