

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # M04000002801

1. Entity Name
VERO BEACH GRAND HARBOR REALTY, LLC



Principal Place of Business

C/O AMERICAN REAL ESTATE HOLDINGS LP
100 SOUTH BEDFORD ROAD
MOUNT KISCO, NY 10549

Mailing Address

C/O AMERICAN REAL ESTATE HOLDINGS LP
100 SOUTH BEDFORD ROAD
MOUNT KISCO, NY 10549



04042005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-1360613

Applied For

Not Applicable

5. Certificate of Status Desired ☐

~~\$5.00~~ Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
VERO BEACH ACQUISITION LLC
100 SOUTH BEDFORD ROAD
MOUNT KISCO, NY 10549

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
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NAME
STREET ADDRESS
CITY- ST- ZIP

U00000332021
04/26/05-80038-012 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

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

DATE

Daytime Phone #