2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 11, 2009
Secretary of State

DOCUMENT# M06000001104

Entity Name: EW SUNVEST DEVELOPMENT, LLC

Current Principal Place of Business:

425 N. FEDERAL HIGHWAY
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

425 N. FEDERAL HIGHWAY
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 20-4283984 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BIRDMAN, LOUIS
425 NORTH FEDERAL HIGHWAY
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	HIRSCH, HERBERT	
Address:	425 N. FEDERAL HIGHWAY	
City-St-Zip:	HALLANDALE, FL 33009	
Title:	MGR	( ) Delete
Name:	BIRDMAN, HARVEY	
Address:	425 N. FEDERAL HIGHWAY	
City-St-Zip:	HALLANDALE, FL 33009	
Title:	MGR	(X) Delete
Name:	BIRDMAN, LOUIS	
Address:	425 N. FEDERAL HIGHWAY	
City-St-Zip:	HALLANDALE, FL 33009	
Title:	MGR	(X) Delete
Name:	PEOPLES, BETH L	
Address:	2711 CENTERVILLE ROAD, SUITE 400	
City-St-Zip:	WILMINGTON, DE 19808	
Title:	MGR	(X) Delete
Name:	HAY, SUZANNE M	
Address:	2711 CENTERVILLE ROAD, SUITE 400	
City-St-Zip:	WILMINGTON, DE 19808	
Title:	MGR	(X) Delete
Name:	FRIEDMAN, HARRIS	
Address:	425 NORTH FEDERAL HIGHWAY	
City-St-Zip:	HALLANDALE, FL 33009	

ADDITIONS/CHANGES:

Title:	MGR	(X) Change ( ) Addition
Name:	FRIEDMAN, HARRIS	
Address:	425 N. FEDERAL HIGHWAY	
City-St-Zip:	HALLANDALE, FL 33009	
Title:	MGR	(X) Change ( ) Addition
Name:	SUNVEST RESORT COMMU, NITIES, LC	
Address:	425 N. FEDERAL HIGHWAY	
City-St-Zip:	HALLANDALE, FL 33009	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: HARRIS FRIEDMAN MGR 03/11/2009

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