

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

FILED

2002 SEP -9 PM 3: 08

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

DOCUMENT # M99000001149

1. Entity Name

GROVE OCEAN LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3400 S.W. 27TH AVENUE

Suite, Apt. #, etc.

3. Mailing Address

1999 AVENUE OF THE STARS

Suite, Apt. #, etc.

10TH FLOOR

DO NOT WRITE IN THIS SPACE

City & State

COCONUT GROVE, FLORIDA

City & State

LOS ANGELOS, CALIFORNIA

4. FEI Number

134069782

Applied For

Not Applicable

Zip

33133

Country

USA

Zip

90067

Country

USA

5. Certificate of Status Desired

\$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

CORPORATION SERVICES COMPANY

Street Address (P.O. Box Number is Not Acceptable)

1201 BAYS STREET

City

TALLAHASSEE

FL

Zip Code  
32301

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

*Cynthia A. Harris*

Cynthia L. Harris  
as its agent

9/15/02

DATE

700007605807-5

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MANAGING MEMBER  
SunAmerica Housing Fund 760  
1999 AVENUE OF THE STARS, 10TH FLOOR  
LOS ANGELOS, CALIFORNIA 90067

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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)(b), 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 60B, Florida Statutes.

SIGNATURE:

*Howard Zeltm*

9/3/02

(310)772-6169

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

DATE

PHONE NUMBER

CR2E083B (12/01)



FILED  
2002 SEP -9 PM 3:08  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 732430 4303929

AUTHORIZATION : *Patricia Kyzut*

COST LIMIT : \$ 50.00

ORDER DATE : September 5, 2002

ORDER TIME : 9:54 AM

ORDER NO. : 732430-005

CUSTOMER NO: 4303929

CUSTOMER: Ms. Sandra L. Blake  
Greenberg Traurig, P.a.  
1221 Brickell Avenue  
21st Floor  
Miami, FL 33131-3238

RECEIVED  
02 SEP - 9 PM 2:27  
DIVISION OF STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

CHANGE OF AGENT

NAME: GROVE OCEAN LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY

CONTACT PERSON: Maria Replogle