


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M99000001630	
1. Entity Name CASA CORTEZ APARTMENTS, L.L.C.	

Principal Place of Business 16835 KERCHEVAL GROSSE POINTE, MI 48230	Mailing Address 16835 KERCHEVAL GROSSE POINTE, MI 48230
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2. Principal Place of Business 9036 Muirfield Court	3. Mailing Address 9036 Muirfield Court
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Tallahassee, FL	City & State Tallahassee, FL
Zip 32312	Country USA

FILED
04 JAN 13 2003
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01072004 Chg-LLC CR2E083 (10/03)

4. FEI Number 38-3493738	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CHERRY, JESSE G JR. 9036 MUIRFIELD COURT TALLAHASSEE, FL 32312	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2004	Make check payable to Florida Department of State
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9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CRAWFORD REALTY GROUP, L.L.C. 16835 KERCHEVAL GROSSE POINTE, MI 48230 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Jesse G. Cherry, Jr. 9036 Muirfield Court Tallahassee, FL 32312 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 report as required by Chapter 608, Florida Statutes.

SIGNATURE: <u>Jesse G. Cherry, Jr.</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	Date 1/9/04	Daytime Phone # (850) 556-2514 (850) 668-7993
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