

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001728

FILED  
Feb 06, 2009  
Secretary of State

Entity Name: HOMETOWN LAKE WORTH, L.L.C.

## Current Principal Place of Business:

C/O HOMETOWN AMERICA 150 N. WACKER DRIVE  
SUITE 2800  
CHICAGO, IL 60606 US

## New Principal Place of Business:

## Current Mailing Address:

C/O HOMETOWN AMERICA 150 N. WACKER DRIVE  
SUITE 2800  
CHICAGO, IL 60606 US

## New Mailing Address:

FEI Number: 36-4196688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: HOMETOWN AMERICA COM, MUNITIES, INC.  
Address: 150 N. WACKER DR., STE 2800  
City-St-Zip: CHICAGO, IL 60606 US

Title: CEO ( ) Delete  
Name: CLINE, JR., RICHARD G  
Address: 150 N. WACKER DRIVE, SUITE 2800  
City-St-Zip: CHICAGO, IL 60606 US

Title: PRES ( ) Delete  
Name: O'BERRY, GREGORY A  
Address: 150 N. WACKER DRIVE, SUITE 2800  
City-St-Zip: CHICAGO, IL 60606 US

Title: CIO ( ) Delete  
Name: ZILIS, PATRICK C  
Address: 150 N. WACKER DRIVE, SUITE 2800  
City-St-Zip: CHICAGO, IL 60606 US

Title: SVP ( ) Delete  
Name: BRAUN, STEPHEN H  
Address: 150 N. WACKER DRIVE, SUITE 2800  
City-St-Zip: CHICAGO, IL 60606 US

Title: VP,T ( ) Delete  
Name: CURATOLO, THOMAS  
Address: 150 N. WACKER DRIVE, SUITE 2800  
City-St-Zip: CHICAGO, IL 60606 US

## ADDITIONS/CHANGES:

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:

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: JEREMY MITCHELL, AUTHORIZED AGENT

MGR

02/06/2009

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