

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 16, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000095002 1. Entity Name FAIRVIEW SHORES DEVELOPMENT, LLC	
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Principal Place of Business 2104 BLUE IRIS PLACE LONGWOOD, FL 32779	Mailing Address 2104 BLUE IRIS PLACE LONGWOOD, FL 32779
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DO NOT WRITE IN THIS SPACE



07042007 No Chg-LLC	CR2E083 (11/05)
4. FEI Number 61-1493798	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent VARMA, BOBBY 2104 BLUE IRIS PLACE LONGWOOD, FL 32779

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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 September 14, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM VARMA, BOBBY 2104 BLUE IRIS PLACE LONGWOOD, FL 32779
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HAYTER, KEITH 501 BLUFF OAK COURT APOPKA, FL 32712
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MURRAY, TIMOTHY 3220 DEER CHASE RUN LONGWOOD, FL 32779
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BERCINI, RICHARD 124 SEVILLE CHASE DRIVE WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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U00000763013
07/16/07-80010-017 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  _____ Date: 7/09/07 _____ Daytime Phone # _____

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