2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L97000000317

1. Entity Name CIRCLE THREE DEVELOPMENT, L.C.



Principal Place of Business

7400 ARBUCKLE CREEK RD. SEBRING, FL 33870 Mailing Address

P.O. BOX 1069

SEBRING, FL 33871-1069

FILED Mar 15, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03082004 No Chg-LLC CR2E083 (10/03)

4.	FEI Number	Applied For
	65-0734642	 Not Applicable
5.	Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WOHL, JAMES M 7400 ARBUCKLE CREEK RD. SEBRING, FL 33870

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

3-9-04

863-382-3887

SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE. Registered Agent signature required when reinstating)	DATE
Fi D	ling Fee is \$50.00 ue by May 1, 2004	<u> </u>	U00000089648 03/15/04-80101-004 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY: ST-ZIP	MGRM HEARTLAND REAL ESTATE CORPORATION 7400 ARBUCKLE CREEK RD. SEBRING, FL 33870		
title Name Street Address City-St-Zip	MGRM CIRCLE M CITRUS, INC. 1379 N EAST VIOLA ROAD AVON PARK, FL 33825		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM EXCAVATION POINT, INC. 7944 S GEORGE BLVD SEBRING, FL 33872		NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
ITILE NAME STREET ADDRESS CITY+ST-ZIP			
11. I hereby indicated	certify that the information supplied with this filing does not que on this report is true and accurate and that my signature shall the company or the receiver or trustee amount of the receiver of the receiver of the receiver or trustee amount of the receiver of the rec	Lalify for the exemption stated in Section 119.07(3)(in all layer the same legal effect as if made under oath, this report as required by Chapter 608, Florida S), Florida Statutes, I further certify that the information that I am a managing member or manager of the

HEARTLAND REAL ESTATE CORF

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