2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000005633

1. Entity Name PRG DEVELOPMENT SPE, LLC



FILED Mar 19, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

10739 DEERWOOD PARK BLVD., SUITE 103 JACKSONVILLE, FL 32256 10739 DEERWOOD PARK BLVD., SUITE 103 JACKSONVILLE, FL 32256



DO NOT WRITE IN THIS SPACE

03082007 No Chg-LLC CR2E083 (11/05)

ı	4. FEI Number	Applied For
	NOT APPLICABLE	Not Applicable
1	5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

RAX CO. ATTN: H. TIMOTHY GILLIS 50 N. LAURA STREET, SUITE 3300 JACKSONVILLE, FL 32202

STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

the above named entity submits this statement for the purpose of changing its registered office or registered agent. Or both, in the state of Profice. Train laminal with, and according to obligations of registered agent.				
SIGNATURE.	Signature, typed or printed name of registered agent and bite if applicable.	(NOTE: Registered Agent signature required when reinstaling)	DATE	
F	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PRG DEVELOPMENTS, INC. 10739 DEERWOOD PARK BLVD., SUITE 103' JACKSONVILLE, FL 32256			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000672358 03/28/07-80067-002 50.0 DO NOT WRITE IN THIS SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME				

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: Ladson Montgomery, MGRM 3/8/07 904/399-5222

SIGNATURE: Date of Fighted Name of Signing Managing Member, or authorized Representative Date Date Daylore Prome #