2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000086302

1. Entity Name BUCKS RUN DEVELOPERS, LLC



Principal Place of Business

2814 TERN CT

SAINT JAMES CITY, FL 33956

Mailing Address

P.O. BOX 5265 FRISCO, CO 80443 FILED Jan 11, 2007 08:00 AM Secretary of State



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01052007 No Chg-LLC CR2

CR2E083 (11/05)

FEI Number
 20-1988671

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BAVIELLO, JR., MICHAEL A ESQUIRE 1025 FIFTH AVENUE NORTH NAPLES, FL 34102

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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.

Signature, typed or printed name of registered agent and title if applicable

(NOTE. Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2007

<u> </u>			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MERRIMAN, GEORGE 2051 SNOCK DR NAPLES, FL 34102		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CRANE, TIMOTHY J P.O. BOX 5265 FRISCO, CO 80443		
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11 I hereby certify that the information supplied with this filling does not qualify for the ex-			

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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:

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

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