I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 02/17/2016

SIGNATURE: WILLIAM B. LETTINGA

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: LETTINGA DEVELOPMENT COMPANY LLC **Current Principal Place of Business:**

5625 PRAIRIE CREEK DR., SUITE 100

CALEDONIA, MI 49316

DOCUMENT# L14000037415

Current Mailing Address:

5625 PRAIRIE CREEK DR., SUITE 100 CALEDONIA, MI 49316

FEI Number: 46-5007077

Name and Address of Current Registered Agent:

LETTINGA, WILBUR A 4831 CONOVER CT. FT. MYERS, FL 33908 US

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

Author

Title	MGR	Title	MGR
Name	LETTINGA, WILBUR A	Name	LETTINGA, WILLIAM B
Address	4831 CONOVER CT.	Address	9300 SEDONA RIDGE CT.
City-State-Zip:	FT. MYERS FL 33908	City-State-Zip:	BYRON CENTER MI 49315

rized F	Person(s) Detail :		
	MGR	Title	MGR
	LETTINGA, WILBUR A	Name	LETTINGA, WILLIAM B
6	4831 CONOVER CT.	Address	9300 SEDONA RIDGE CT.

Certificate of Status Desired: No

Secretary of State CC4921751250

Date

FILED Feb 17, 2016

Date

MANAGER

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT