

**2005 LIMITED LIABILITY COMPANY 2M  
ANNUAL REPORT**

**FILED**  
**Jul 25, 2005 8:00 am**  
**Secretary of State**

07-25-2005 90042 021 \*\*\*150.00

**DOCUMENT # L00000004223**

1. Entity Name  
**EVOLVE DEVELOPMENT GROUP, LLC**



Principal Place of Business  
**1281 EDGEWATER CIRCLE  
BRADENTON, FL 34209**

Mailing Address  
**1281 EDGEWATER CIRCLE  
BRADENTON, FL 34209**

**20065230**



2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

02222005 Chg-LLC CR2E083 (10/03)

City & State

4. FEI Number  
**65-0996200**

Applied For  
 Not Applicable

Zip Country

5. Certificate of Status Desired  **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILCOX, DAVID W ESQ.  
308 13TH ST. W  
BRADENTON, FL 34205**

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
Due by May 1, 2005**

Make check payable to  
**Florida Department of State**

**9. MANAGING MEMBERS/MANAGERS**

**10. ADDITIONS/CHANGES**

TITLE NAME  Delete  
**MGRM  
GARBUTT, ROBERT B  
1281 EDGEWATER CIRCLE  
BRADENTON, FL 34209**

TITLE NAME  Change  Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  Delete  
**MGRM  
HORTON, DAVID C  
2917 BRECKENRIDGE  
BRIGHTON, MI 48114**

TITLE NAME  Change  Addition  
STREET ADDRESS **2917 Breckenridge**  
CITY-ST-ZIP

TITLE NAME  Delete

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  Change  Addition

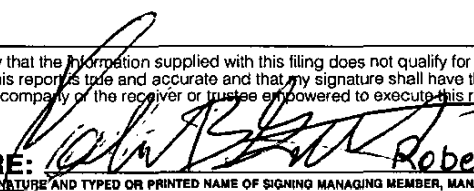
TITLE NAME  Delete

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  Change  Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:  **Robert B. Garbutt** **6-27-05 941-792-7443**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #