## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **FILED** May 25, 2005 08:00 AM. Secretary of State

	VII AT A COLUTE 1 CEL	$\sim$	<b>45</b> :
DOCUMENT #	£L00000007118	up.	
1. Entity Name			

Principal Place of Business

ASHLAND DEVELOPMENT, L.L.C.

Mailing Address 665 HAROLD AVENUE

665 HAROLD AVENUE WINTER PARK, FL 32789 WINTER PARK, FL 32789



03282005 No Chg-LLC

CR2E083 (10/03)

4.	FEI Number				Applied For
	20-0102548	 		ŗ	Not Applicable
5.	Certificate of Status Desired	Ö	\$5.0 Fee F		Additional uired

6. Name and Address of Current Registered Agent

NADER, MICHAEL A 665 HAROLD AVENUE

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WINTER PARK, FL 32789		IN THIS SPACE			
	named entity submits this statement for the purpose of changing its registered tions of registered agent.	d office or registered agent, or both, in the State of Florida. I am lamiliar with, and accept			
SIGNATURE.		Agent signature required when renstating) DATE			
F D	iling Fee is \$50.00 ue by May 1, 2005				
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NADER, MICHAEL 665 HAROLD AVENUE WINTER PARK, FL 32789	U0000368313 05/25/05-80012-002 <b>50.</b> 00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NADER, AMY S 665 HAROLD AVENUE WINTER PARK, FL 32789				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY: 51-ZIP					
11. Thereby of indicated limited lia	certify that the information supplied with this filing does not qualify for the exem on this report is true and accurate and that my signature shall have the same! billity company or the receiver or trustee empowered to execute this report as r	ption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information legal effect as if made under oath, that I am a managing member or manager of the equired by Chapter 608. Florida Statutes.			