

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000000096

1. Entity Name

TEQUESTA DEVELOPMENT, L.L.C.



Principal Place of Business

P.O. BOX 417
FORT LAUDERDALE, FL 33302

Mailing Address

P.O. BOX 417
FORT LAUDERDALE, FL 33302



04132006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1069163

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BANTA PROPERTIES
4050 N.E. 1ST AVE.
OAKLAND PARK, FL 33334

**DO NOT WRITE
IN THIS SPACE**

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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME BANTA, CATHERINE M
STREET ADDRESS PO BOX 24843
CITY-ST-ZIP FORT LAUDERDALE, FL 33307

TITLE MGRM
NAME LEFKA, BARBARA A
STREET ADDRESS PO BOX 417
CITY-ST-ZIP FORT LAUDERDALE, FL 33302

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

1100000559384
05/17/06-80134-018 50.00

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IN THIS SPACE**

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:

Catherine M. Banta

Catherine M Banta

4-24-06

954 546 0759

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

Date

Daytime Phone #