

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000001279

1. Entity Name

MOUNT EVANS DEVELOPMENT, LLC



Principal Place of Business

**C/O JAMES A. LYTLE, JR.
3411 TAMiami TRAIL N
NAPLES FL 34103**

Mailing Address

**C/O JAMES A. LYTLE, JR.
P.O. BOX 2437
NAPLES FL 34106**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/07)

4. FEI Number

91-2104117

Applied For

Not Applicable

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

**LYTLE, JAMES A JR
3411 TAMiami TRAIL N
NAPLES FL 34103**

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

Signature typed or printed name of registered agent and fee (if applicable)

(NOTE: Registered agent's signature required when transferring)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete
NAME **MGR**
STREET ADDRESS **LYTLE, JAMES A JR**
CITY- ST- ZIP **3411 TAMiami TRAIL N
NAPLES FL 34103**

☐ Change ☐ Addition
U000000813106
02/12/08-80076-021 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

James A. Lytle, Jr.

JAMES A. LYTLE, JR

01/27/08

239-571-9075

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

Date

Expiry Period