2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009119

Entity Name: UZNIS DEVELOPMENT, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
411 7TH STREET SUITE 3 WEST PALM BEACH, FL 33401	411 7TH STREET SUITE 1 WEST PALM BEACH, FL 33401

Current Mailing Address:	**New Mailing Address:**
411 7TH STREET SUITE 3 WEST PALM BEACH, FL 33401	411 7TH STREET SUITE 1 WEST PALM BEACH, FL 33401

FEI Number: 65-1109927   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
UZNIS, JOHN C 411 7TH STREET SUITE 3 WEST PALM BEACH, FL 33401 US	UZNIS, JOHN C 411 7TH STREET SUITE 1 WEST PALM BEACH, FL 33401 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: _____   04/14/2009
            Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	UZNIS, JOHN C	Name:	UZNIS, JOHN C
Address:	411 7TH STREET, UNIT 3	Address:	411 7TH STREET, SUITE 1
City-St-Zip:	WEST PALM BEACH, FL 33401 US	City-St-Zip:	WEST PALM BEACH, FL 33401 US

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	UZNIS, GEORGE	Name:	
Address:	24610 MICHIGAN AVENUE	Address:	
City-St-Zip:	DEARBORN, MI 48124	City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JOHN C. UZNIS   MGRM   04/14/2009
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date