

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011728

FILED  
Aug 13, 2007  
Secretary of State

**Entity Name:** GENERAL BUILDING DEVELOPMENT, LLC

**Current Principal Place of Business:**

222 US HIGHWAY ONE, SUITE 4  
TEQUESTA, FL 33469

**New Principal Place of Business:**

**Current Mailing Address:**

222 US HIGHWAY ONE, SUITE 4  
TEQUESTA, FL 33469

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

WILSON, JAMES A  
222 US HIGHWAY ONE, SUITE 4  
TEQUESTA, FL 33469 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: WILSON, JAMES A  
Address: 222 US HIGHWAY ONE, SUITE 4  
City-St-Zip: TEQUESTA, FL 33469

Title: MGR ( ) Delete  
Name: GODINO, ROBERT  
Address: 222 US HIGHWAY ONE, SUITE 4  
City-St-Zip: TEQUESTA, FL 33469

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMES A WILSON

MGR

08/13/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date