2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000016850

1. *Entity Name*
LINDSEY'S CROSSING DEVELOPMENT, LLC

Principal Place of Business	Mailing Address
6101 GAZEBO PARK PLACE SUITE 107 JACKSONVILLE, FL 32257	6101 GAZEBO PARK PLACE SUITE 107 JACKSONVILLE, FL 32257

DO NOT WRITE IN THIS SPACE

02052006No Chg-LLC CR2E083 (11/05)

4. FEI Number
02-0554947
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SHEFFIELD & BOATRIGHT, P.A.
6101 GAZEBO PARK PLACE N
SUITE 101
JACKSONVILLE, FL 32257

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SHACTER, DAVID A
STREET ADDRESS	6101 GAZEBO PARK PLACE, STE 107
CITY-ST-ZIP	JACKSONVILLE, FL 32257
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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02/25/06-80008-020 50.00

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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: _____ Member Feb. 8, 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #