




2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90796 045 ****50.00

DOCUMENT # L02000002207 1. Entity Name COURTYARDS OF VENICE DEVELOPMENT, LLC					
Principal Place of Business 227 NOKOMIS AVE. S. VENICE, FL 34285				Mailing Address P.O. BOX 1767 VENICE, FL 34284	
2. Principal Place of Business 247 PONCE DE LEON AVE		3. Mailing Address 247 PONCE DE LEON AVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State VENICE, FL.		City & State VENICE, FL.		4. FEI Number 01-0588172	
Zip 34285		Country U.S.A.		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent DEBOER, ROBERT J 227 NOKOMIS AVE. S. VENICE, FL 34285		7. Name and Address of New Registered Agent Name GREGG G. HASSLER Street Address (P.O. Box Number is Not Acceptable) 247 PONCE DE LEON AVE. City VENICE FL Zip Code 34285			
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  GREGG G. HASSLER 3/16/2005 <small>Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEBOER, ROBERT J 227 NOKOMIS AVENUE S. VENICE, FL 34285	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SOWLE, JAMES L 7664 FAIRWAY WOODS DRIVE SARASOTA, FL 34232	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FARLEY, DAVID P 265 NOKOMIS AVENUE S. VENICE, FL 34285	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HASSLER, GREGG G 1114 UNDERWOOD DRIVE VENICE, FL 34292	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HASSLER, GREGG G. 247 PONCE DE LEON AVE. VENICE, FL. 34285	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HASSLER, GREGG G. 247 PONCE DE LEON AVE. VENICE, FL. 34285	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HASSLER, GREGG G. 247 PONCE DE LEON AVE. VENICE, FL. 34285	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  GREGG G. HASSLER 3-16-2005 (941) 416-3761 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

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