2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000004927

1. Entity Name
BUCCANEER HOME DEVELOPMENT, L.L.C.

Principal Place of Business	Mailing Address
2329 9TH STREET NORTH C/O RUSSELL V. ROSEN NAPLES, FL 34103	2329 9TH STREET NORTH C/O RUSSELL V. ROSEN NAPLES, FL 34103

01072005 No Chg-LLC   CR2E083 (10/03)

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4. FEI Number NOT APPLICABLE	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

ROSEN, RUSSELL V
2329 9TH STREET NORTH
NAPLES, FL 34103

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

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	ROSEN, RUSSELL V
STREET ADDRESS	2329 9TH STREET NORTH
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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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: _Russell V. Rosen_ RUSSELL V. ROSEN   3/11/05   239-777-8116

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #