


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 11, 2007 8:00 am**  
**Secretary of State**

01-11-2007 90130 019 \*\*\*\*55.00

DOCUMENT # L02000007997		
1. Entity Name AMERICAN DEVELOPERS, LLC		

Principal Place of Business 3195 N POWERLIND RD STE 112 POMPAÑO BEACH, FL 33069-1052	Mailing Address 3195 N POWERLIND RD STE 112 POMPAÑO BEACH, FL 33069-1052
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2. Principal Place of Business - No P.O. Box # 2501 NW 34TH PLACE	3. Mailing Address 2501 NW 34TH PLACE
Suite, Apt. #, etc. STE 32	Suite, Apt. #, etc. STE 32
City & State POMPAÑO BEACH, FL	City & State POMPAÑO BEACH, FL
Zip 33069-5930	Country USA



01052007 Chg-LLC CR2E083 (12/06)

4. FEI Number 03-0427099		Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent THIRER, MARTIN 2950 W CYPRESS CREEK ROAD STE 102 FT. LAUDERDALE, FL 33309		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

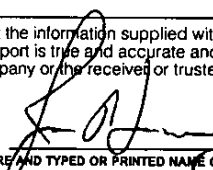
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$50.00 Due by May 1, 2007	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAMWAY, JAMES 3195 N POWERLINE RD STE 112 POMPAÑO BEACH, FL 330691052 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2501 NW 34th PLACE, STE. 32 POMPAÑO BEACH, FL 33069-5930 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAMWAY, CAROLE 3195 N POWERLINE RD STE 112 POMPAÑO BEACH, FL 330691052 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2501 NW 34th PLACE, STE. 32 POMPAÑO BEACH, FL 33069-5930 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  JAMES HAMWAY 1-8-7- 9549731983

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