2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000010923

1. Entity Name
CMDP DEVELOPMENT, LLC

Principal Place of Business	Mailing Address
6735 33RD ST. EAST SARASOTA, FL 34243	6112 33RD ST E STE 102 BRADENTON, FL 34203

DO NOT WRITE IN THIS SPACE

02082008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
04-3662100

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BROWNING, ROBERT W JR.
1800 2ND STREET, SUITE 880
SARASOTA, FL 34236

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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)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

000000337417
03/04/08-80057-006 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	MUTH, W. CHRIS
STREET ADDRESS	6735 33RD ST. EAST
CITY-ST-ZIP	SARASOTA, FL 34243
TITLE	MGR
NAME	MCCABE, MARK T
STREET ADDRESS	6735 33RD ST. EAST
CITY-ST-ZIP	SARASOTA, FL 34243
TITLE	MGR
NAME	BURGHARDT, BRIAN DANIEL
STREET ADDRESS	6112 33RD ST E STE 102
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	MGR
NAME	BURGHARDT, PHILLIP L
STREET ADDRESS	6112 33RD ST E STE 102
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 2/19/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #