2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP

FILED Feb 13, 2004 08:00 AM Secretary of State

ANNUAL KEPURI				Secretary of State	
1. Entity Nan	MENT # L020000153 EVELOPMENT, L.C.	367		Secretary of State	
12164 TAM	ie of Business IAMI TRAIL DA, FL 33955	Mailing Address 12164 TAMIAMI TRAIL PUNTA GORDA, FL 33955			
DO NOT WRITE IN THIS SPACE			CE	01302004 No Chg-LLC	
6. Name and Address of Current Registered Agent YOUNG, JERRY T 12164 TAMIAMI TRAIL PUNTA GORDA, FL 33950				DO NOT WRITE IN THIS SPACE	
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 Fforida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and site if applicable [NOTE: Registered Agent signature required when reinstating) DATE Filling Fee is \$50.00 Due by May 1, 2004					
ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER PVST YOUNG, JERRY T 12164 TAMIAMI TRAIL PUNTA GORDA, FL	S/MANAGERS		U00000051061 02/16/04-8003 7- 002 50. 00	
ITLE NAME STREET ADDRESS CITY -ST-ZIP HTLE NAME STREET ADDRESS CITY -ST-ZIP HTLE			DO NOT WRITE IN THIS SPACE		
MAME SIRET ADDRESS CITY-ST-21P TITLE NAME STREET ADDRESS					

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 menaging member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Date

Daytone Phone #

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAIG HANGLING MEMBER, OR AUTHORIZED REPRESENTATIVE