## 2004 LIMITED LIABILITY COMPANY. ANNUAL REPORT

#### DOCUMENT # L02000017558

1. Entity Name

MTM DEVELOPMENT, L.L.C.



Principal Place of Business

323 PAGE BACON ROAD MARY ESTHER, FL 32569 Mailing Address

323 PAGE BACON ROAD MARY ESTHER, FL 32569

### FILED May 07, 2004 8:00 am Secretary of State

05-07-2004 90003 002 \*\*\*\*50.00

**64001110** 



02112004 No Chg-LLC

CR2E083 (10/03)

5	Certificate of Status Desired	 \$5.00	Additional
4.	FEI Number 54-2074598	-	Applied For Not Applicable

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MCMICHAEL, GARY 323 PAGE BACON ROAD MARY ESTHER, FL 32569

**SIGNATURE** 

# DO NOT WRITE IN THIS SPACE

4.26.04

852-664-1249

	e named entity submits this statement for the purpose of chan tions of registered agent.	iging its registered office or registered agent, or both, in the State of Florida. I am lamiliar with, and acc	:ept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)  DATE	
F D	iling Fee is \$50.00 ue by May 1, 2004		
9.	MANAGING MEMBERS/MANAGERS		
NAME STREET ADDRESS CITY-ST-ZIP	MGR TODD, MARK F 1006 SHAMILAR PT. DR. SHALIMAR, FL 32579		
TITLE NAME STREET ADORESS CITY-ST-ZIP	MGR MCCAIN, HARVEY L 616 CROWDER CT FORT WALTON BEACH, FL 32548		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE