

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000019122**

1. Entity Name  
WATERFRONT DEVELOPMENT LLC



Principal Place of Business  
701 W. CYPRESS CREEK ROAD, SUITE 303  
FORT LAUDERDALE, FL 33309

Mailing Address  
701 W. CYPRESS CREEK ROAD, SUITE 303  
FORT LAUDERDALE, FL 33309

**DO NOT WRITE IN THIS SPACE**



01122005No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
45-0497792

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**5. Name and Address of Current Registered Agent**

KODSI, ISAAC  
701 W. CYPRESS CREEK ROAD  
SUITE 303  
FORT LAUDERDALE, FL 33309

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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 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	MGRM
NAME	TOCCI, PETER
STREET ADDRESS	701 W. CYPRESS CREEK ROAD, SUITE 303
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	MGRM
NAME	KODSI, ISAAC
STREET ADDRESS	701 W. CYPRESS CREEK ROAD, SUITE 303
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000329263  
04/25/05-80113-002 50.00

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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:**

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

Date

Daytime Phone #