
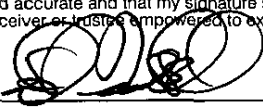


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2004 8:00 am
Secretary of State

02-23-2004 90346 039 ****50.00

DOCUMENT # L02000022017 1. Entity Name REGIONAL DEVELOPMENT/LAKE HART, LLC					
Principal Place of Business 5511 HANSEL AVENUE ORLANDO, FL 32809			Mailing Address 5511 HANSEL AVENUE ORLANDO, FL 32809		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 48-1277906	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent RUSSELL, DOUGLAS R 5511 HANSEL AVENUE ORLANDO, FL 32809			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, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUSSELL, DOUGLAS R 5511 HANSEL AVE ORLANDO, FL 32809	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOKER, DOUGLAS P 5511 HANSEL AVE ORLANDO, FL 32809	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SECRIST, ROBERT L 5511 HANSEL AVE ORLANDO, FL 32809	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOKER, MARCUS P 5511 HANSEL AVE ORLANDO, FL 32809	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOKER, MARCUS P 5511 HANSEL AVE ORLANDO, FL 32809	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOKER, MARCUS P 5511 HANSEL AVE ORLANDO, FL 32809	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOKER, MARCUS P 5511 HANSEL AVE ORLANDO, FL 32809	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOKER, MARCUS P 5511 HANSEL AVE ORLANDO, FL 32809	<input type="checkbox"/> Delete			
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, MANAGER, OR AUTHORIZED REPRESENTATIVE					
Date 2-18-04 Daytime Phone # 407/851-1519					