

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jul 21, 2005 08:00 AM
Secretary of State**

DOCUMENT # L02000024417

1. Entity Name

SOUTH TAMPA DEVELOPERS, LLC



Principal Place of Business

3808 SAN NICHOLAS STREET
TAMPA, FL 33629

Mailing Address

3808 SAN NICHOLAS STREET
TAMPA, FL 33629



07142005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

54-2104593

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LUETGERT, M.D.
3808 SAN NICHOLAS ST
TAMPA, FL 33629

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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 September 7, 2005**

U00000373907
07/21/05-80004-011 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	VP
NAME	LUETGERT, M.D.
STREET ADDRESS	3808 SAN NICHOLAS
CITY-ST-ZIP	TAMPA, FL 33629
TITLE	P
NAME	CARTER, STEVEN R
STREET ADDRESS	3808 SAN NICHOLAS
CITY-ST-ZIP	TAMPA, FL 33629
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 #