

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000025074

1. Entity Name
GLOBAL DEVELOPMENT COMPANY, LLC



Principal Place of Business
**11865 US HIGHWAY 41 SOUTH
GIBSONTON, FL 33534**

Mailing Address
**11865 US HIGHWAY 41 SOUTH
GIBSONTON, FL 33534**



01102007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
45-0501845

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SCHULTES, RICHARD J SR
11865 US HIGHWAY 41 SOUTH
GIBSONTON, FL 33534**

**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 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, 2007**

9. MANAGING MEMBERS/MANAGERS

| | |
|----------------|---------------------------|
| TITLE | MGRM |
| NAME | SCHULTES, AUGUST C III |
| STREET ADDRESS | 11865 US HIGHWAY 41 SOUTH |
| CITY-ST-ZIP | GIBSONTON, FL 33534 |
| TITLE | MGRM |
| NAME | SCHULTES, EDWARD A SR |
| STREET ADDRESS | 11865 US HIGHWAY 41 SOUTH |
| CITY-ST-ZIP | GIBSONTON, FL 33534 |
| TITLE | MGRM |
| NAME | SCHULTES, RICHARD J SR |
| STREET ADDRESS | 11865 US HIGHWAY 41 SOUTH |
| CITY-ST-ZIP | GIBSONTON, FL 33534 |
| TITLE | MGRM |
| NAME | SCHULTES, JAMES F JR |
| STREET ADDRESS | 11865 US HIGHWAY 41 SOUTH |
| CITY-ST-ZIP | GIBSONTON, FL 33534 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

1-10-2007

Date

813-741-3010

Daytime Phone #