

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026341

FILED
Jul 06, 2007
Secretary of State

Entity Name: PURDY-MAC DEVELOPMENT, LC

Current Principal Place of Business:

5980 CLUBHOUSE DRIVE
VERO BEACH, FL 32967

New Principal Place of Business:

Current Mailing Address:

5980 CLUBHOUSE DRIVE
VERO BEACH, FL 32967

New Mailing Address:

FEI Number: 86-1050390 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SEGAL, BARRY G
BARRY G. SEGAL, P.A.
2801 OCEAN DRIVE, STE. 204
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

MCCAIN, WILLIAM F
WILLIAM F. MCCAIN
5980 CLUBHOUSE DR
VERO BEACH, FL 32967 US

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.

SIGNATURE: WILLIAM F. MCCAIN

07/06/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCCAIN, WILLIAM F
Address: 5980 CLUBHOUSE DRIVE
City-St-Zip: VERO BEACH, FL 32967

Title: MGRM () Delete
Name: PURDY, GARY D
Address: 5980 CLUBHOUSE DRIVE
City-St-Zip: VERO BEACH, FL 32967

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WILLIAM F. MCCAIN

MGRM

07/06/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date