

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 19, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000026918	
1. Entity Name BABCOCK - GREEN DEVELOPMENT, LLC	



Principal Place of Business 1857 OLD TOMOKA RD ORMOND BEACH, FL 32174	Mailing Address 1857 OLD TOMOKA RD ORMOND BEACH, FL 32174
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02252005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 42-1559710	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BABCOCK, KEVIN 1857 OLD TOMOKA RD ORMOND BEACH, FL 32174	
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**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BABCOCK, KEVIN 1857 OLD TOMOKA RD ORMOND BEACH, FL 32174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREEN, LANCE E 6469 LONGLAKE DRIVE PORT ORANGE, FL 32128
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/19/05-80034-024 50.00

**DO NOT WRITE
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: Kevin Babcock Kevin Babcock 3-16-05 386 566-1877
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #