

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009194

FILED
May 01, 2012
Secretary of State

Entity Name: SCARPELLO DEVELOPMENT, L.L.C.

Current Principal Place of Business:

1857-109 STATE ROAD 20
HAWTHORNE, FL 32640 IN

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2100
HAWTHORNE, FL 32640 IN

New Mailing Address:

FEI Number: 76-0727771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCARPELLO, PAUL M
1857-109 STATE ROAD 20
HAWTHORNE, FL 32640 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES
Name: SCARPELLO, PAUL M
Address: P.O. BOX 2100
City-St-Zip: HAWTHORNE, FL 32640 IN

Title: PRES
Name: SCARPELLO, PAUL M
Address: P.O. BOX 2100
City-St-Zip: HAWTHORNE, FL 32640 IN

Title: PRES
Name: SCARPELLO, PAUL M
Address: P.O. BOX 2100
City-St-Zip: HAWTHORNE, FL 32640 IN

Title: PRES
Name: SCARPELLO, PAUL M
Address: P.O. BOX 2100
City-St-Zip: HAWTHORNE, FL 32640 IN

Title: PRES
Name: SCARPELLO, PAUL M
Address: P.O. BOX 2100
City-St-Zip: HAWTHORNE, FL 32640 IN

Title: PRES
Name: SCARPELLO, PAUL M
Address: P.O. BOX 2100
City-St-Zip: HAWTHORNE, FL 32640 IN

I hereby 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: PAUL M SCARPELLO

PRES

05/01/2012

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