

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000010604

Entity Name: AQUI ESTA DEVELOPMENT CO., LLC

FILED  
May 24, 2005  
Secretary of State

**Current Principal Place of Business:**

73 SOUTH PALM AVE. SUITE 223  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

73 SOUTH PALM AVE. SUITE 223  
SARASOTA, FL 34236

**New Mailing Address:**

FEI Number: 14-1876244      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

**Name and Address of New Registered Agent:**

STEADMAN, GARY L  
73 SOUTH PALM AVE. SUITE 223  
SARASOTA, FL 34236      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: STEADMAN, GARY L  
Address: 73 S. PALM AVENUE, SUITE 223  
City-St-Zip: SARASOTA, FL 34236

Title: MGRM ( ) Delete  
Name: VAN GUCHT, HERMAN  
Address: 318 TAMiami TRAIL, UNIT 14  
City-St-Zip: PUNTA GORDA, FL 33955

**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 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 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: GARY L. STEADMAN

MGRM

05/24/2005

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