

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90030 039 ****50.00

DOCUMENT # L03000013916

1. Entity Name
FLORIDA HOMES AND DEVELOPMENT, LLC



Principal Place of Business
1597 S. PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34952 US

Mailing Address
1597 SOUTH PORT ST. LUCIE BOULEVARD
PORT ST. LUCIE, FL 34952 US

20037312



04242006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0458515

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHAFFER, MARTIN
1597 SOUTH PORT ST. LUCIE BOULEVARD
PORT ST. LUCIE, FL 34952

**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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SCHAFFER, MARTIN
STREET ADDRESS	1597 SOUTH PORT ST. LUCIE BOULEVARD
CITY-ST-ZIP	PORT ST. LUCIE, FL 34952

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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

Date

Daytime Phone #