

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018407

FILED  
Jan 25, 2006  
Secretary of State

Entity Name: MAPLE LEAF DEVELOPMENT, LLC

**Current Principal Place of Business:**

4805 BUCKEYE ROAD  
PALMETTO, FL 34221

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 996  
PALMETTO, FL 34220

**New Mailing Address:**

FEI Number: 42-1595169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLALOCK, LANDERS, WALTERS & VOGLER, P.A.  
802 11TH STREET WEST  
BRADENTON, FL 34205 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: MGR ( ) Delete  
Name: MIXON, EUGENE A  
Address: 3412 10TH LN W  
City-St-Zip: PALMETTO, FL 34221

Title: MGR ( ) Delete  
Name: MIXON, CAROLE P  
Address: 3412 10TH LN W  
City-St-Zip: PALMETTO, FL 34221

Title: MGR ( ) Delete  
Name: MIXON, R. EMORY  
Address: 11300 ONEIL RD  
City-St-Zip: PALMETTO, FL 34221

Title: MGR ( ) Delete  
Name: MIXON, SCOTT S  
Address: 2833 48TH WAY E  
City-St-Zip: BRADENTON, FL 34203

**ADDITIONS/CHANGES:**

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

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

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 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: SCOTT S MIXON

MGR

01/25/2006

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