

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED  
May 01, 2008  
Secretary of State

DOCUMENT# L03000019130

Entity Name: NOTTELEE DEVELOPMENT, LLC

**Current Principal Place of Business:**

1642 MEDICAL LANE  
SUITE A  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

1642 MEDICAL LANE  
SUITE A  
FORT MYERS, FL 33907

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

SCOTT, NEAL  
1642 MEDICAL LANE  
SUITE A  
FORT MYERS, FL 33907 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: SCOTT, NEAL  
Address: 1642 MEDICAL LANE, SUITE A  
City-St-Zip: FORT MYERS, FL 33907

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify 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: NEAL SCOTT

MGR

05/01/2008

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