2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020945

Entity Name: MOONRAKER DEVELOPMENT LLC

FILED Apr 20, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

490 SW VOLTAIR TERR. 1529 SE ROYAL GREEN CIR PORT ST LUCIE, FL 34984

APT S.204

PORT ST LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

1529 SE ROYAL GREEN CIR 490 SW VOLTAIR TERR. APT. S.204 PORT ST LUCIE, FL 34984

PORT ST LUCIE, FL 34952

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

MOROZIUK-ROTHE, JILL J MGRM 1529 SE ROYAL GREEN CIR, APT. S204 PORT ST LUCIE, FL 34952

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:

ADDITIONS/CHANGES:

MGRM Title: (X) Change () Addition () Delete MOROZIUK-ROTHE, JILL J MOROZIUK-ROTHE, JILLY J Name: Name: Address:

1529 SE ROYAL GREEN CIR, S204 Address: 1529 SE ROYAL GREEN CIR, S204 City-St-Zip: PORT ST LUCIE, FL 34952 City-St-Zip: PORT ST LUCIE, FL 34952

Title: MGRM () Delete Title: () Change () Addition

Name: GILMAN, CHARLES Name: Address: 1312 W YALE ST. Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip:

Title: MBR () Delete Title: MGR (X) Change () Addition

CHADNY, RAYMOND Name: CHLADNY, RAYMOND Name:

4540 NE SANDPEBBLE TRACE # 306 4540 NE SANDPEBBLE TRACE # 306 Address: Address:

City-St-Zip: STUART, FL 34996 City-St-Zip: STUART, FL 34996

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: JILLY MOROZIUK-ROTHE **MGRM** 04/20/2007