


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000022103 1. Entity Name VOGEL DEVELOPMENT, L.L.C.	
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Principal Place of Business 2502 N. ROCKY POINT DRIVE STE. 1050 TAMPA, FL 33607	Mailing Address 2502 N. ROCKY POINT DRIVE STE. 1050 TAMPA, FL 33607
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DO NOT WRITE IN THIS SPACE



01122005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 74-3095593	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STROHAUER, GARY N
BAXTER,STROHAUER,MANNION & SILBERMANN P.A.
1150 CLEVELAND STREET STE. 300
CLEARWATER, FL 33755

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**


9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THE RYAN GROUP, LLC 2502 N. ROCKY POINT DRIVE STE. 1050 TAMPA, FL 33607
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02/08/05-80019-025 50.00

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11. I hereby certify that the information supplied with this filing does not qualify 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 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:  **2/3/05 813-288-8078**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #