

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 07, 2008 8:00 am
Secretary of State

05-07-2008 90021 011 ***138.75

DOCUMENT # L03000027927

1. Entity Name
VAN FLEET DEVELOPMENT GROUP CF, LLC



Principal Place of Business
**103 SOUTH NINTH AVE
WAUCHULA, FL 33873**

Mailing Address
**103 SOUTH NINTH AVE
WAUCHULA, FL 33873**

2. Principal Place of Business - No P.O. Box #

111 2ND AVE NE

Suite, Apt. #, etc.

SUITE 900

3. Mailing Address

111 2ND AVE NE

Suite, Apt. #, etc.

SUITE 900



04302008

Chg-LLC

CR2E083 (12/06)

City & State
ST. PETERSBURG, FL

City & State
ST. PETERSBURG, FL

4. FEI Number
20-0125619

Applied For
Not Applicable

Zip
33701

Country
USA

Zip
33701

Country
USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BRONSTEIN, JOEL D
150 SECOND AVENUE NORTH, SUITE 1100
ST. PETERSBURG, FL 33701**

7. Name and Address of New Registered Agent

Name
REED, JOHN W

Street Address (P.O. Box Number is Not Acceptable)

111 2ND AVE NE

SUITE 900

City
ST. PETERSBURG

FL

Zip Code
33701

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 **John W Reed**

John W Reed

4/30/08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
STAR-LAND DEVELOPMENT GROUP, LLC
111 2ND AVE NE STE 917
SAINT PETERSBURG, FL 33701** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
REED, JOHN W
111 2ND AVE NE SUITE 900
ST. PETERSBURG, FL 33701** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: **John W Reed**

John W Reed

4/30/08

727-895, 5122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #