2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED May 01, 2007 8:00 am Secretary of State 05-01-2007 90322 047 ****50.00

DOCUMENT # L03000028832 1. Entity Name 441 DEVELOPMENT GROUP, LLC					05-01-2007 90322 047 ****50.00			
120 NE 4TH	er of Business STREET RDALE, FL 33301	Mailing Address	33301			७४५५ :	1878	
2. Principal Place of Business - No P.O. Box # 212 E Brown Blyd.								
Suite Apt etc. Suite, Apt etc.					03202007	Chg-LLC	CR2E083 (12/06)	ı
City & Star	indardale Fr	FE lauderdale FT			4. FEI Numb 05-058			pplied For ot Applicable
33	6. Name and Address of Current F	33301	Browse	0	5. Certificat	e of Status Desired	S5.00 Ad Fee Require	ditional
RICHARDSON, GEX F					7. Name an	d Address of New Re	egisterea Agent	
120 NE 4T	SON, GEX F 'H STREET JDERDALE, FL 33301	Size of A	Street Address (Proposition Not Accepted Vd -					
of auderdale FL 30301								
8. The above named entity submits his 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	Signature typed or punit drame of registered agent a	nd title if applicable. (NOTE	Registered Agent signat	ure required	when reinstating)		DATE	
Filing Fee is \$50.00 Due by May 1, 2007			-				check payable to Department of Sta	te
9.	MANAGING MEMBER	L RS/MANAGERS	10.			ADDITIONS/		
TITLE NAME	MGRM GWJV, INC.	☐ Delete	TITLE NAME		- 0		Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	120 NE 4TH STREET FORT LAUDERDALE, FL 33301		STREET ADDRESS CITY-ST-ZIP	22	EB	puzzed	B(Va(3 877)
TITLE	MGRM	☐ Delete	TITLE		Jacq	A-VA PACE	☐ Change	Addition
NAME STREET ADDRESS	WRIGHT, GLENN 1431 MIDDLE RIVER DR	•	NAME STREET ADDRESS					
TITLE	FORT LAUDERDALE, FL 33301	☐ Delete	CITY-ST-ZIP				☐ Change	Addition
NAME STREET ADDRESS		below	NAME				Onunge	
CHTY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE NAME	☐ Oelete 711						☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	\wedge		NAME STREET ADDRESS CITY-ST-ZIP					
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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.								
SIGNATURE: 3-2007 761-3472								
JIGNAI	SIGNATURE AND TYPED OR PRINTED MAME OF	SIGNING MANAGING MEMBER, MAN	AGER, OR AUTHORIZED	REPRESE	NTATIVE	Date	Daytime Phone #	((, ===