## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000031047

1. Entity Name C. C. DEVELOPMENT ASSOCIATES, L.L.C.



## **FILED** Jan 27, 2005 8:00 am Secretary of State 01-27-2005 90077 014 \*\*\*\*50.00

				450	TELES					
Principal Place of Business Mailing Address 825 THOMASVILLE ROAD P 0 BOX 2756						<b>4</b> 000	3801			
TALLAHASSE		CINNIMINSON, NJ 0807	7 US	i			<b>2</b> • •			
		·								
2. Principal Pl	ace of Business	3. Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				01202005	Chg-LLC	CR2EC	083 (10/03)	
City & State	•	City & State			•	4. FEI Numb 57-118	-		<del> </del>	plied For Applicable
Zip	Country	Zip	Count	гу	,		of Status Desired		\$5.00 Addi	
	6. Name and Address of Current	Realstered Agent	T		1	7. Name and	Address of New I	Registered .	Agent	
S. 41) T. S. I	•			Name				<del>-</del>		
	ASVILLE ROAD			Street A	ddress (P.0	O. Box Numb	er is Not Acceptable	e)		
TALLAHAS	SSEE, FL 32303		Ī							
				City				FL	Zip Code	•
	named entity submits this statement fo ions of registered agent.	r the purpose of changing its	registere	d office or	registered	agent, or bo	oth, in the State of F	lorida. I am	familiar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Flegistered	Agent signati	ure required wit	hen reinstating)		DATE		
							. Ma	ke check p	auchlo to	
Filing Fee is \$50.00 Due by May 1, 2005			,					•	ent of State	•
9.	MANAGING MEMBE	I RS/MANAGERS	10.				ADDITIONS	/CHANGES	3	
TITLE	MGR S	☐ Delete	TITLE						☐ Change	☐ Addition
NAME	GORDON, MICHAEL A SR.		NAME							-
STREET ADDRESS	P O BOX 748			ET ADDRESS						
CITY-ST-ZIP	BUCKINGHAM, PA 18912		-	ST-ZIP			<del></del>			
TITLE	MGRS	☐ Delete	TITLE	1					Change	☐ Addition
NAME Street Address	LORD, MICHAEL 2009 S. RT 9		NAME	ET ADORESS						
CITY-ST-ZIP	SEAVILLE, NJ 08230			-ST-ZIP						
TITLE	MGRT	☐ Defete	TITLE		· · · · · ·				Change	Addition
NAME	KOCK, CHRISTIAN	C Detere	NAME		KOCH	1 CHRIS	CANTO		Ed ourning	
STREET ADDRESS*	336 MENON RD	Ē	STREE	ET ADORESS	236	MAN	STIAN love RD.		<b></b>	
CITY-ST-ZIP	HATBORO, PA 19040		СПҮ-	ST-ZIP		•				
TITLE	MGRG	☐ Delete	TITLE						<b>⊠</b> Change	☐ Addition
NAME	FRAISON, RAYMOND		NAME		TRAIN	ICR, RA	YMOND		•	
STREET ADDRESS	20 ACORN DR.		STREE	ET AODRESS			.,,			
City-St-Zip	TABERNACLE, NJ 08088		CITY-	-ST-ZIP						
TITLE	MGRG	☐ Delete	TITLE						Change	☐ Addition
NAME	MCHUGH, EAMON		NAME							
STREET ADDRESS	287 SOUTH CHURCH ST			ET ADDRESS						
CITY-ST-ZIP	MOORESTOWN, NJ 08057		спу-	ST-ZP	ļ		<del> </del>			
TITLE		☐ Delete	TITLE						Change	Addition
NAME			NAME							j
STREET ADORESS				ET ADORESS	1					
CITY-ST-ZIP	cartify that the information supplied with	thin filing door not evolity for		-ST-ZIP	ted in Sect	tion 110.07/2	Vi) Elorida Statutos	I further on	etifu that the is	formation

Thereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I turner certify that the informatic 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:	an		CHRIST	IAN	KOCH
	AND TYPED OR PRINTED NAME	E OF SIGHENG MANAGENG	MEMBER, MANAGER,	OR AUTHORIZED	REPRESENTATIVE

CHRISTIAN KOCH