

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033289

FILED
Mar 23, 2009
Secretary of State

Entity Name: ACORN DEVELOPMENT, LLC

Current Principal Place of Business:

21 RIVERSIDE DR.
501
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

21 RIVERSIDE DR
501
COCOA, FL 32922

New Mailing Address:

FEI Number: 20-0386157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN, KEITH J ESQ.
21 RIVERSIDE DR
501
COCOA, FL 32922 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: NORMAN, KEITH J ESQ
Address: 21 RIVERSIDE DR. APT. 501
City-St-Zip: COCOA, FL 32922

Title: MGR () Delete
Name: BOUCHER-NORMAN, CLAIRE
Address: 21 RIVERSIDE DR. APT. 501
City-St-Zip: COCOA, FL 32922

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KEITH J. NORMAN

MR.

03/23/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date