

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000037416 1. Entity Name OSPREY VILLAGE DEVELOPMENT COMPANY, LLC	
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Principal Place of Business 3900 CLARK ROAD, SUITE L-1 SARASOTA, FL 34233	Mailing Address 3900 CLARK ROAD, SUITE L-1 SARASOTA, FL 34233
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DO NOT WRITE IN THIS SPACE



03032008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 80-0079778	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

DOMBER, HARLAN R ESQUIRE
 3900 CLARK ROAD, SUITE L-1
 SARASOTA, FL 34233

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

05/20/08-80034-021 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PATEL, ANILKUMAR R 64 INLETS BOULEVARD NOKOMIS, FL 34275
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *X Anil Kumar R Patel X* ^{MGRM} *x 4-17-08 x 941 484 7708*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ANILKUMAR R PATEL