2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042359

Entity Name: PILLAR DEVELOPMENT, LLC

1216 BOWMAN STREET

CLERMONT, FL 34711 US

Address:

City-St-Zip:

FILED Feb 07, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1216 BOWMAN STREET CLERMONT, FL 34711 US **Current Mailing Address: New Mailing Address:** 1216 BOWMAN STREET CLERMONT, FL 34711 US FEI Number: 20-0359447 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OBRIG, ELWOOD M 700 ALMOND STREET CLERMONT, FL 34711 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete BOUTROS, FOUAD Name: Name: 1216 BOWMAN STREET Address: Address: City-St-Zip: CLERMONT, FL 34711 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BOUTROS, DIANE Name: Address: 1216 BOWMAN STREET Address: City-St-Zip: CLERMONT, FL 34711 US City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition NAHMATALLAH, JOHN Name: Name: Address: 1216 BOWMAN STREET Address: City-St-Zip: CLERMONT, FL 34711 US City-St-Zip: Title: MRG () Delete Title: () Change () Addition Name: BOUTROS, KEVIN Name: Address: 1216 BOWMAN STREET Address: City-St-Zip: CLERMONT, FL 34711 US City-St-Zip: Title: MRG () Delete Title: () Change () Addition BOUTROS, MICHAEL Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: FOUAD BOUTROS MGRM 02/07/2006