2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2009
Secretary of State

DOCUMENT# L03000043661

Entity Name: ANDANTE DEVELOPMENT, LLC

Current Principal Place of Business:

437 CAPTAINS CIRCLE
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

437 CAPTAINS CIRCLE
DESTIN, FL 32541

New Mailing Address:

FEI Number: 20-0386949 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPRENKLE, JASON B
437 CAPTAINS CIRCLE
DESTIN, FL 32541 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: MGR ( ) Delete
Name: MCCARTHY, PATRICK K
Address: 755 GRAND BLVD STE B105 PMB 348
City-St-Zip: DESTIN, FL 32550

Title: MGR ( ) Delete
Name: SPRENKLE, JASON B
Address: 437 CAPTAINS CIRCLE
City-St-Zip: DESTIN, FL 32541

Title: MGR ( ) Delete
Name: GLOSSON, BRAD
Address: 4201 CONGRESS ST., STE. 240
City-St-Zip: CHARLOTTE, NC 28209

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MCCARTHY, PATRICK K
Address: 48 SURFER LANE
City-St-Zip: SEACREST BEACH, FL 32413

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: JASON B SPRENKLE MGRM 01/17/2009

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