

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056458

FILED  
Mar 12, 2007  
Secretary of State

Entity Name: DEVELOPMENT CAPE CORAL, L.L.C.

## Current Principal Place of Business:

999 CAXAMBAS DRIVE  
MARCO ISLAND, FL 34145

## New Principal Place of Business:

## Current Mailing Address:

999 CAXAMBAS DRIVE  
MARCO ISLAND, FL 34145

## New Mailing Address:

FEI Number: 58-2680660

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LYNNE, WASHBURN  
999 CAXAMBAS DR  
MARCO ISLAND, FL 34145 US

## Name and Address of New Registered Agent:

LYNNE, WASHBURN W  
999 CAXAMBAS DR  
MARCO ISLAND, FL 34145 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: LYNNE W. WASHBURN

03/12/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: WASHBURN, LYNNE W TRUSTEE  
Address: 999 CAXAMBAS DRIVE  
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGRM ( ) Delete  
Name: FLAHARTY, PATRICK  
Address: 11670 ROSEMONT  
City-St-Zip: FT. MYERS, FL 33913

Title: MGRM ( ) Delete  
Name: ROSSMAN, DENNIS  
Address: 1207 NW 18TH ST  
City-St-Zip: CAPE CORAL, FL 33993

Title: MGRM ( ) Delete  
Name: CASE, MICHAEL W  
Address: 2710 EL DURADO PARKWAY  
City-St-Zip: CAPE CORAL, FL 33914

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: WASHBURN, LYNNE W TRUSTEE  
Address: 999 CAXAMBAS DRIVE  
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGRM (X) Change ( ) Addition  
Name: FLAHARTY, PATRICK  
Address: 11670 ROSEMOUNT  
City-St-Zip: FT. MYERS, FL 33913

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

Title: MGRM (X) Change ( ) Addition  
Name: CASE, MICHAEL W  
Address: 2710 EL DORADO PARKWAY  
City-St-Zip: CAPE CORAL, FL 33914

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.

SIGNATURE: LYNNE W. WASHBURN

MGR

03/12/2007

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