2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 03, 2005
Secretary of State

DOCUMENT# L04000004762

Entity Name: COMMONWEALTH DEVELOPMENT OF FLORIDA, LLC

Current Principal Place of Business:

6107 MEMORIAL HIGHWAY, SUITE G
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

6107 MEMORIAL HIGHWAY, SUITE G
TAMPA, FL 33615

New Mailing Address:

FEI Number: 54-2142048 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

TIM H. SAFRANSKY
6107 MEMORIAL HWY, STE G
TAMPA, FL 33615 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: TIM H. SAFRANSKY 01/03/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	SAFRANSKY, TIM H	
Address:	6107 MEMORIAL HIGHWAY, SUITE G	
City-St-Zip:	TAMPA, FL 33615	
Title:	MGR	( ) Delete
Name:	MILLER, JEFFREY L DR.	
Address:	6107 MEMORIAL HIGHWAY, SUITE G	
City-St-Zip:	TAMPA, FL 33615	
Title:	S	(X) Delete
Name:	MILLER, JEFFREY L DR.	
Address:	6107 MEMORIAL HIGHWAY, SUITE G	
City-St-Zip:	TAMPA, FL 33615	
Title:	T	(X) Delete
Name:	SAFRANSKY, TIM H	
Address:	6107 MEMORIAL HIGHWAY, SUITE G	
City-St-Zip:	TAMPA, FL 33615	

ADDITIONS/CHANGES:

Title:	MGRM	(X) Change ( ) Addition
Name:	SAFRANSKY, TIM H	
Address:	6107 MEMORIAL HIGHWAY, SUITE G	
City-St-Zip:	TAMPA, FL 33615	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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 for the exemption stated in Section 119.07(3)(i), 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: TIM H. SAFRANSKY MGRM 01/03/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date