2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000006608

1. Entity Name
TRICO DEVELOPMENT, LLC



FILED
Mar 26, 2007 08:00 AM
Secretary of State

Principal Place of Business

4323 DAVIDA DRIVE MELBOURNE, FL 32934 Mailing Address

4323 DAVIDA DRIVE MELBOURNE, FL 32934



03212007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired Status

6. Name and Address of Current Registered Agent

BOUDREAUX, CHARLES E 4323 DAVIDA DRIVE MELBOURNE, FL 32934

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| SI | SNATURE Signature, typed or printed name of registered agent and title if applicable. | (NOTE: Registered Agent signature required when reinstating) | | DATE | |
|----|---|--|-------------------------------|-------------------------------|---|
| | the obligations of registered agent. | | | | |
| | The above named entity submits this statement for the purpose of change | ging its registered office or registered agent, or b | oth, in the State of Florida. | I am familiar with, and accep | t |

Filing Fee is \$50.00 Due by May 1, 2007

| | 9. | 9. MANAGING MEMBERS/MANAGERS | |
|--|--|---|--|
| | TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR BLOCKWORKS, INC. 3915 RAMBLEWOOD COURT MELBOURNE, FL 32934 | |
| | TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR BOUDREAUX, CHARLES E 4323 DAVIDA DRIVE MELBOURNE, FL 32934 | |
| | TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR DEBICKES, JOHN W 3900 KATIE LANE MELBOURNE, FL 32934 | |
| | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| | TITLE NAME: STREET ADDRESS CITY-ST-ZIP | | |
| | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |

U00000679072 04/03/07-80022-019 55.00

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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.

SNATURE: (VILLIA) CANCEL (PARIES DOUDER MAY

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/22/07

321-253-2059

Daytime Phone