

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000008637

FILED  
Jul 04, 2007  
Secretary of State

Entity Name: PATE DEVELOPMENT, L.L.C.

**Current Principal Place of Business:**

10554 EGRET POINTE LANE  
WEST PALM BEACH, FL 33411

**New Principal Place of Business:**

**Current Mailing Address:**

10554 EGRET POINTE LANE  
WEST PALM BEACH, FL 33411

**New Mailing Address:**

FEI Number: 27-0080698      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

PATE, ROBERT  
10554 EGRET POINTE LANE  
WEST PALM BEACH, FL 33411      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:**

Title: MGRM ( ) Delete  
Name: PATE, ROBERT  
Address: 10554 EGRET POINTE LANE  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: MGRM ( ) Delete  
Name: PATE, JOHN R  
Address: 10554 EGRET POINTE LANE  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: MGRM ( ) Delete  
Name: PATE, JOHN  
Address: 8345 HERITAGE CLUB DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33412

**ADDITIONS/CHANGES:**

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 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: ROBERT PATE

PRES

07/04/2007

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