#### **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

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### DOCUMENT # L04000009162

DEVELOPING REAL ESTATE SOLUTIONS, LLC

**FILED** May 01, 2006 08:00 AM Secretary of State

Principal Place of Business

**451 CENTRAL PARK DRIVE** LARGO, FL 33771 US

Mailing Address

**451 CENTRAL PARK DRIVE** LARGO, FL 33771 US

# 04262008 No Chg-LLC

4. FEI Number

CR2E083 (11/05)

20-0681995

Applied For Not Applica

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVENPORT, DOUGLAS J **451 CENTRAL PARK DRIVE** LARGO, FL 33771

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	a named entity submits this statement for the purpose of chations of registered agent.	anging its registered office or registered agent, or both	t, in the State of Florida. I am familiar with, and ec
SIGNATURE.	Signature, typed or printed name of registered agent and fills if applicable	(NOTE: Registered Agent signature required when reinstating)	- DATE
	agriculto, apod at preside retire to regional of agriculture is approached	freque ( observe significant (adapte montre existing)	
D	iling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS	1	
TITLE	MGR	±+	
NAME	DAVENPORT, DOUGLAS J		
STREET ADDRESS	451 CENTRAL PARK DRIVE	_	ՄԵՐԵՐԵՐ «ՌԴԻԴ :

CITY-ST-ZIP LARGO, FL 33771 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

05/13/06-80019-002 50.00

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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 algorature shall have the same legal effect as if made under eath, that I am a managing member or manager of it limited liability company or the receiver or fustee empty leged to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP