

FILED
Jun 20, 2005 8:00 am
Secretary of State

04-21-2005 90028 007 ****50.00

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000012261			
1. Entity Name NAVARRE COMMERCIAL DEVELOPERS, L.L.C.			
Principal Place of Business 21 E. GARDEN STREET, SUITE 200 PENSACOLA, FL 32502		Mailing Address 21 E. GARDEN STREET, SUITE 200 PENSACOLA, FL 32502	
2. Principal Place of Business 4 LAGUNA STREET SUITE 201 FORT WALTON BEACH, FL 32548 USA		3. Mailing Address 4 LAGUNA STREET SUITE 201 FORT WALTON BEACH, FL 32548 USA	
4. FE Number 20-0914829		Applied For (Not Applicable)	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent COLBERT, RICHARD M 123 WEST ROMANA STREET, SUITE 800 PENSACOLA, FL 32502		7. Name and Address of New Registered Agent FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when redesignating) Filing Fee is \$50.00 Due by May 1, 2005			
Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEMBER-MANAGER ☐ Delete STEVEN P DEL CALLO 4 Laguna St. #201, FWB, FL	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEMBER-MANAGER ☐ Delete W. TODD SCHWEIZER 4 Laguna St. #201, FWB, FL	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(c), 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.			
SIGNATURE:  STEVEN P. DEL CALLO		Date: 4/18/05 20/301-0179	

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