2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 07, 2007 8:00 am Secretary of State

DOCUMENT # L04000024378 1. Entity Name L & V DEVELOPMENT, L.L.C.						02-07-200	-		
Principal Plac	e of Rusiness	Mailing Address	1		- ·	-			
4743 PAPAY		4743 PAPAYA PARK							
DESTIN, FL		DESTIN, FL 32541							
							B444 B B(44		(SB) 84 (SB)
2 Origanian I D	Place of Business - No P.O. Box #	1							
z. Principal P	race of Business - No P.O. Box #	3. Mailing Address					#4([8 8 1/1]		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			┨				
					01242007	Chg-LLC	CR2E08	3 (12/06)	
City & State		City & State			4. FEI Numbe	St.		Ap	oplied For
	-		1		90-017	1198		No	ot Applicable
Zip	Country	Zìp	Country		5. Certificate	of Status Desired		5.00 Add	
	6. Name and Address of Current	Pagistared Apart	<u> </u>		7 Name and	Address of Now E		ee Require	d
	v. Name and Address of Current	Kedistaled Adelit	N.	ame	/ Name and	Address of New F	registered A	gent	
VALLIANA	TOS, ANDREW								
	AYA PARK		Si	reet Address	(P.O. Box Numbe	er is Not Acceptable	e)		
DESTIN, F	EL 32541				7.8 19				
								_	
			C	ity			FL	Zip Coo	e ;
8. The above	named entity submits this statement for	r the purpose of changing its	registered of	ffice or registe	rea agent, or bot	th, in the State of Flo	orida. Lam fa	miliar with.	and accept
ine obligat	tions of registered agent.							•	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT)	E: Registered Age	nt signature require	d when reinstating)		DATE	·	
	iling Fee is \$50.00 ue by May 1, 2007						e check pa a Departme		B
		RS/MANAGERS	10.				a Departme		B
) D	ue by May 1, 2007	RS/MANAGERS	10.			Florida	A Departme		Addition
9. TITLE NAME	MANAGING MEMBE MGRM LUPER, STEVE	☐ Delete				Florida	A Departme	nt of Stati	
9. TITLE NAME STREET ADDRESS	MANAGING MEMBE MGRM LUPER, STEVE 7861 BAYOU CLUB BOULEVAR	☐ Delete	TITLE NAME STREET AD			Florida	A Departme	nt of Stati	
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moleated on trits report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I a limited liability company or the receiver or trustee emptwered to execute this report as required by Chapter 608, Florida Statutes.

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