

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000030026

FILED  
Jan 22, 2007  
Secretary of State

Entity Name: FLORIDA RETAIL DEVELOPMENT, LLC

**Current Principal Place of Business:**

2200 LUCIEN WAY  
SUITE 150  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

2200 LUCIEN WAY  
SUITE 150  
MAITLAND, FL 32751

**New Mailing Address:**

FEI Number: 77-0632901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RALSTON, GARY M  
151 TRISMEN TERRACE  
WINTER PARK, FL 32789 US

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

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: RALSTON, GARY M  
Address: 151 TRISMEN TER  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR ( ) Delete  
Name: DREW, VICTOR E  
Address: 1347 CHATFIELD PL  
City-St-Zip: ORLANDO, FL 32814

Title: MGR ( ) Delete  
Name: GENGLER, LAUREN R  
Address: 414 EL CAMINO REAL S  
City-St-Zip: LAKELAND, FL 33813

**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 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: GARY M RALSTON

MR.

01/22/2007

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