

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 20, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L04000030870

1. Entity Name

CHESTNUT HILL DEVELOPMENT, L.L.C.



Principal Place of Business

15105 N.W. 94TH AVENUE  
ALACHUA, FL 32615

Mailing Address

15105 N.W. 94TH AVENUE  
ALACHUA, FL 32615



02192008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

20-2247145

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

WALLACE, ROBERT D  
15105 N.W. 94TH AVENUE  
ALACHUA, FL 32615

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000864816  
04/07/08-80002-023 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	WALLACE, ROBERT D
STREET ADDRESS	15105 N.W. 94TH AVENUE
CITY-ST-ZIP	ALACHUA, FL 32615

TITLE	
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CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 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: \_\_\_\_\_

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

3/18/08 386-460-2820

Date

Daytime Phone #