

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034876

FILED
Aug 24, 2005
Secretary of State

Entity Name: PRO DEVELOPMENT OF SARASOTA, LLC

Current Principal Place of Business:

237 S. WASHINGTON DRIVE
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

237 S. WASHINGTON DRIVE
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 90-0238636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SABA, RICHARD D ATTY
SABA & KING, LLP
2033 MAIN STREET, SUITE 303
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

GIBSON, JAMES D ESQUIRE
400 BURNS COURT
SARASOTA, FL 34236 US

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: JAMES D. GIBSON, ESQUIRE

08/24/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRATZKE, CHAD
Address: 237 S. WASHINGTON DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: BRATZKE, KRISTI
Address: 237 S. WASHINGTON DRIVE
City-St-Zip: SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHAD BRATZKE

MGRM

08/24/2005

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