




2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

3/ **FILED**
Apr 19, 2005 8:00 am
Secretary of State

03-21-2005 90537 003 ****55.00

DOCUMENT # L04000036035					
1. Entity Name COUNTRY WALK DEVELOPERS, LLC					
Principal Place of Business 1700 MCMULLEN BOOTH ROAD SUITE C1 CLEARWATER, FL 33759-2130			Mailing Address 1700 MCMULLEN BOOTH ROAD SUITE C1 CLEARWATER, FL 33759-2130		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip 33759-2129	Country	Zip 33759-2129	Country	4. FEI Number 20-1128675	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
5. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
PUZZITIELLO, ROSS A 1700 MCMULLEN BOOTH ROAD SUITE C1 CLEARWATER, FL 33759-2130			Name PUZZITIELLO, ROSS A Street Address (P.O. Box Number is Not Acceptable) 4153 Arlington Drive City Palm Harbor FL Zip Code 34685		
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 		ROSS A. PUZZITIELLO, REG-AGENT		DATE 3-1-05	
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	MGRM PARK FLORIDA REAL ESTATE HOLDINGS LLC 1700 N. MCMULLEN BOOTH ROAD, SUITE C1 CLEARWATER, FL 33759-2129	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify 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 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: 			DATE: 3/1/05 440-238-9440		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE RICHARD A. PUZZITIELLO, JR CEO					

30003737



03152005 Chg-LLC CR2E083 (10/03)