

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)



**FILED**  
**Jul 06, 2007 8:00 am**  
**Secretary of State**

07-06-2007 90088 001 \*\*\*500.00

**DOCUMENT # L04000046507**

1. Entity Name

CBCI DEVELOPMENT GROUP, LLC



Principal Place of Business

Mailing Address

THE KRESS BUILDING, SUITE 205  
475 CENTRAL AVENUE  
ST. PETERSBURG FL 33701  
US

C/O ERNEST L. MASCARA, P.A.  
475 CENTRAL AVENUE, SUITE 202  
ST. PETERSBURG FL 33701  
US

00011010



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

1950 Lake Ave SE

1950 Lake Ave S.E.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#B

#B

City & State

City & State

Largo, FL

Largo, FL

Zip

Country

Zip

Country

33771

Pinellas

33771

Pinellas

1st MOORE

CR2E083 (10/06)

4. FEI Number

20-1269243

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$5.00 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MASCARA, ERNEST L  
THE KRESS BUILDING, SUITE 202  
475 CENTRAL AVENUE  
ST. PETERSBURG FL 33701

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
MGR  
LODER, JOHN  
STREET ADDRESS  
475 CENTRAL AVENUE, SUITE 205  
CITY- ST- ZIP  
ST. PETERSBURG FL 33701

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
1950 Lake Ave SE #B  
Largo, FL 33771

☒ Change ☐ Addition

TITLE  
NAME  
MGR  
SUMMERFORD, ALLEN  
STREET ADDRESS  
101 WEST EDEN STREET, SUITE C  
CITY- ST- ZIP  
EDENTON NC 27932

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
MGR  
SPENCER, JAMES  
STREET ADDRESS  
1401 SOUTH FOR HARRISON AVENUE  
CITY- ST- ZIP  
CLEARWATER FL 33756

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

TITLE  
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STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*April Charles*

5-1-07

(727) 581-7200

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

Date

Daytime Phone #