## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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## **DOCUMENT # L04000058729**

SATÉRBO DEVELOPMENT, L.L.C.



**FILED** Apr 25, 2008 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

**108 CAMPBELL DRIVE** WINTER HAVEN, FL 33884 P.O. BOX 261

AUBURNDALE, FL 33823



04082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SATERBO, STEPHEN C 108 CAMPBELL DRIVE WINTER HAVEN, FL 33884

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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.	(MOTE: Registered Agent signature required when reinstating)	DATE							
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75										
9.	MANAGING MEMBERS/MANAGERS									
TITLE	MGRM									
NAME	SATERBO, STEPHEN C									

STREET ADDRESS | P.O. BOX 261 CITY-ST-ZIP AUBURNDALE, FL 33823 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

05/15/08-80021-005 138.75

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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 fiability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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