

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060547

**FILED**  
**Mar 01, 2005**  
**Secretary of State**

**Entity Name:** E.V.L. DEVELOPMENT, LLC

**Current Principal Place of Business:**

620 SANDPIPER STREET  
NAPLES, FL 341020604

**New Principal Place of Business:**

2377 LINWOOD AVENUE  
#210  
NAPLES, FL 34112

**Current Mailing Address:**

620 SANDPIPER STREET  
NAPLES, FL 341020604

**New Mailing Address:**

2377 LINWOOD AVENUE  
#210  
NAPLES, FL 34112

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WOOD, C. LANE ESQ.  
% SALVATORI & WOOD, P.L.  
4001 TAMiami TRAIL NORTH, SUITE 300  
NAPLES, FL 341033060 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: JONES, FALCONER III  
Address: 620 SANDPIPER STREET  
City-St-Zip: NAPLES, FL 341020604

**ADDITIONS/CHANGES:**

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

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: FALCONER JONES III

MGRM

03/01/2005

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