2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # L04000063212

1. Entity Name
CDK DEVELOPMENT, LLC

Principal Place of Business
810 S. STERLING AVENUE
TAMPA, FL 33609

Mailing Address
810 S. STERLING AVENUE
TAMPA, FL 33609

DO NOT WRITE IN THIS SPACE

01122007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
57-1212294

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BERNER, DAVID R
810 S. STERLING AVENUE
TAMPA, FL 33609

DO NOT WRITE IN THIS SPACE

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

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BERNER, CARL E
STREET ADDRESS	125 W. AVENIDA DEL RIO
CITY-ST-ZIP	CLEWISTON, FL 33440
TITLE	MGRM
NAME	BERNER, DAVID R
STREET ADDRESS	3612 W GRANADA STREET
CITY-ST-ZIP	TAMPA, FL 33629
TITLE	MGRM
NAME	ARCURI, KAREN BERNER
STREET ADDRESS	11755 SHIRBURN CIRCLE
CITY-ST-ZIP	PARRISH, FL 34219
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000744106
05/15/07-80136-006 50.00

DO NOT WRITE IN THIS SPACE

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

SIGNATURE: _____ 4/11/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #