

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2008 08:00 AM
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



01042008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

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 _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
BERNER, CARL E
125 W. AVENIDA DEL RIO
CLEWISTON, FL 33440

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
BERNER, DAVID R
3612 W GRANADA STREET
TAMPA, FL 33629

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
ARCURI, KAREN BERNER
11755 SHIRBURN CIRCLE
PARRISH, FL 34219

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

000000838615
03/05/08-80038-022 138.75

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: David Berner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/20/08
Date

813-875-5263
Daytime Phone #