

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 25, 2007 8:00 am**  
**Secretary of State**

01-25-2007 90087 037 \*\*\*\*50.00

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<b>DOCUMENT # L04000071773</b> 1. Entity Name RIVER ROAD DEVELOPMENT, LLC					
Principal Place of Business 233 E. BAY STREET SUITE L - 3 JACKSONVILLE, FL 32202			Mailing Address 233 E. BAY STREET SUITE L - 3 JACKSONVILLE, FL 32202		
2. Principal Place of Business - No P.O. Box # 1660 Prudential Drive <small>Suite, Apt. #, etc.</small> Suite 203		3. Mailing Address <small>Suite, Apt. #, etc.</small>			
City & State Jacksonville, FL		City & State		4. FEI Number 04-3803228	
Zip 32207		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent  BROCK, FREDERICK R ESQ. 1660 PRUDENTIAL DRIVE DUPONT CENTER STE 203 JACKSONVILLE, FL 32207				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ DATE _____ <small>Signature: Typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when re-issuing)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>		<b>Make check payable to Florida Department of State</b>			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY ST ZIP	MGRM FARBER FAMILY LIMITED PARTNERSHIP 991-C LOMAS SANTA FE DRIVE: #441 SOLANA BEACH, CA 92075		TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
<b>SIGNATURE:</b> <b>CURTIS L. FARBER</b> <span style="float: right;">1/16/07 760-783-3333</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					