

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 28, 2005 8:00 am**  
**Secretary of State**

03-28-2005 90285 027 \*\*\*\*50.00

**20024974**



<b>DOCUMENT # L04000072037</b> 1. Entity Name <b>DEBOW-BEALL BROTHERS DEVELOPMENT, L.L.C.</b>					
Principal Place of Business <b>310 VENICE PALMS BLVD. VENICE, FL 34292</b>			Mailing Address <b>310 VENICE PALMS BLVD. VENICE, FL 34292</b>		
2. Principal Place of Business <b>2109 Date Palm Way</b> Suite, Apt. #, etc.		3. Mailing Address <b>2109 Date Palm Way</b> Suite, Apt. #, etc.			
City & State <b>Venice, FL</b>		City & State <b>Venice, FL</b>		4. FEI Number <b>32-0127961</b>	
Zip <b>34292</b>		Country <b>Sarasota</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent <b>DEBOW, JAMES S 310 VENICE PALMS BLVD. VENICE, FL 34292</b>				7. Name and Address of New Registered Agent Name <b>DeBow, James S</b> Street Address (P.O. Box Number is Not Acceptable) <b>2109 Date Palm Way</b> City <b>Venice</b> <b>FL</b> Zip Code <b>34292</b>	
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 <b>James S DeBow</b> DATE <b>3/16/05</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BEALL, DAVID 592 MOSSY CREEK LANE VENICE, FL 34292	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BEALL, JAMES 1500 SAN YSIDRO VENICE, FL 34292	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEBOW, JAMES S 310 VENICE PALMS BLVD. VENICE, FL 34292	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DeBow, James S 2109 Date Palm Way Venice, FL 34292	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DeBow, James S 2109 Date Palm Way Venice, FL 34292	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DeBow, James S 2109 Date Palm Way Venice, FL 34292	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DeBow, James S 2109 Date Palm Way Venice, FL 34292	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11. I hereby certify that the information supplied with this filing does not qualify 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 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: James S DeBow</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<b>3/16/05 (941) 483-4681</b> <small>Date Daytime Phone #</small>		