

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 15, 2008 8:00 am**  
**Secretary of State**

04-15-2008 90096 035 \*\*\*138.75

**DOCUMENT # L04000083787**

1. Entity Name  
MANCINI DEVELOPMENT CP, L.C.



Principal Place of Business  
3100 SW 15TH ST  
DEERFIELD BEACH, FL 33442 US

Mailing Address  
6850 19 MILE ROAD  
STERLING HTS., MI 48314 US

**50002666**



01302008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-1938810

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MANCINI, DANIEL C MGRM  
3100 SW 15TH ST  
DEERFIELD BEACH, FL 33442

**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  
MANCINI, DANIEL C MGRM  
3100 SW 15TH ST  
DEERFIELD BEACH, FL 33442

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
MANCINI, STEVE M MGRM  
6850 19 MILE ROAD  
STERLING HTS., MI 48314

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
MANCINI, EDWARD A MGRM  
6850 19 MILE ROAD  
STERLING HTS., MI 48314

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**

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:** \_\_\_\_\_

Edward A. Mancini 1/31/08 586 685-1000

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

Date

Daytime Phone #