2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 09, 2005 8:00 am Secretary of State

ANNUAL REPORT					Secretary of State 05-09-2005 90048 026 ****50.00				
DOCUMENT # L04000088887 1. Entity Name C'S LAND DEVELOPMENT, LLC						05-09-200:	5 90048	026 ****5	50.00
Principal Place 201 EAST MA POMONA PAR	AIN STREET	Mailing Address P.O. BOX 1465 SAN MATEO, FL 32187	-		1 (887) 8 11 8	1401	6975		881 III IB 2 1
820 A.	ace of Business Exander St	3. Mailing Address 3.0 A k so Suite, Apt. #, etc.	nder St	4					
Suite, Apt. #		Suite, Apt. #, etc.			04252005	Chg-LLC		083 (10/03)	
SPAUL	gustine, FL	St Hugusi	tine, F	-6	4. FELNLIPOR	-202699	59	<u> </u>	plied For t Applicable
32084		Zip 32084	Country	- 1		e of Status Desired		\$5.00 Add Fee Required	
	6. Name and Address of Current I	Registered Agent	Name		7. Name an	d Address of New F	Registered .	Agent	
GRIGGS, F	ROBERT C MAIN STREET		Name Street Ad	ddress (9.	O Box Numi	per is Not Accepteble	<u>ම</u>		
POMONA	PARK, FL 32181		821	0 15	/enu	ider II			
			City S.J. A			Lugustine, FL 51 23084			
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	egistered office or	registered	gent, or b	oth, in the State of Fi	orida. I am	familiar with,	and accept
SIGNATURE _	Signature, typed of printed name of registered agent a	0.015							
				en care irad ud	Anniestations				
		and the if applicable. (NOTE: I	Registered Agent signatu	are required wi	nen reinstating)		DATE		
Fi	iling Fee is \$50.00 ue by May 1, 2005	no tre ir applicable. (NUTE: I	Registered Agent signatu	ire required wh	nen reinstating)	l .	ke check p	payable to nent of State	
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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.

SIGNATURE: 4/3/05 904-347-51