


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 20, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000090614</b>	
1. Entity Name F & F DEVELOPMENT, LLC	

Principal Place of Business 4462 HICKORY DRIVE PALM BEACH GARDENS, FL 33418	Mailing Address 4462 HICKORY DRIVE PALM BEACH GARDENS, FL 33418
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03132006 No Chg-LLC CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KOHLMEYER, FRED J  
4462 HICKORY DRIVE  
PALM BEACH GARDENS, FL 33418

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reissuing) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$50.00  
Due by May 1, 2006

000000476011  
04/05/06-80039-018 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR KOHLMEYER, FRED J 4462 HICKORY DRIVE PALM BEACH GARDENS, FL 33418
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR KOHLMEYER, FAYE M 4462 HICKORY DRIVE PALM BEACH GARDENS, FL 33418
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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.

**SIGNATURE:**  **FRED J. KOHLMEYER** 3/13/06 561-622-2211  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #