

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093328

Entity Name: MT DEVELOPMENT, LLC

FILED
Jan 09, 2009
Secretary of State

Current Principal Place of Business:

880 AIRPORT ROAD, STE. 108
OAK POINTE BUSINESS PARK
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

880 AIRPORT ROAD, STE. 108
OAK POINTE BUSINESS PARK
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 04-3802970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NEWSLOW, JAMES A III
880 AIRPORT ROAD
STE. 108
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

NEWSLOW, JAMES A III
880 AIRPORT ROAD, STE. 108
OAK POINTE BUSINESS PARK
ORMOND BEACH, FL 32174 US

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.

SIGNATURE: JAMES A. NEWSLOW, III

01/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHIUMENTO, MICHAEL D II
Address: 4 OLD KINGS ROAD NORTH, STE. B
City-St-Zip: PALM COAST, FL 32137 US

Title: MGRM () Delete
Name: NEWSLOW, JAMES A III
Address: 880 AIRPORT ROAD, STE. 108
City-St-Zip: ORMOND BEACH, FL 32174 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JAMES A. NEWSLOW, III

MGRM

01/09/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date