2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2007
Secretary of State

DOCUMENT# L05000004669

Entity Name: GREENLEAF DEVELOPMENT, LLC

Current Principal Place of Business:

609 BROADOAK LOOP
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

609 BROADOAK LOOP
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 20-2173105 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASSAM, BRUCE
P.O. BOX 62038
FORT MYERS, FL 33906 US

Name and Address of New Registered Agent:

FADIL, RICHARD A MGRM
609 BROADOAK LOOP
SANFORD, FL 32771 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: RICHARD A. FADIL 03/13/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	ASSAM, BRUCE	
Address:	P.O. BOX 62038	
City-St-Zip:	FORT MYERS, FL 33906 US	
Title:	MGRM	( ) Delete
Name:	SIMANOFF, DONALD R	
Address:	113 INTRACOASTAL DRIVE	
City-St-Zip:	MADISON, AL 35758 US	
Title:	MGRM	( ) Delete
Name:	FADIL, RICHARD A	
Address:	609 BROADOAK LOOP	
City-St-Zip:	SANFORD, FL 32771 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: RICHARD A. FADIL MGRM 03/13/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date