

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010299

Entity Name: LBC DEVELOPERS, LLC

FILED  
May 07, 2007  
Secretary of State

**Current Principal Place of Business:**

2102 STUBRIDGE COURT  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

2102 STUBRIDGE COURT  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

FEI Number: 20-2270165      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

LEATHERS, WILLIAM  
2102 STURBRIDGE CT  
WINTER SPRINGS, FL 32708      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LEATHERS, WILLIAM  
Address: 2102 STURBRIDGE CT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGRM ( ) Delete  
Name: CHANDLER, STEVEN F  
Address: 1799 GROVEWAY DR  
City-St-Zip: GERMANTOWN, TN 38139

Title: MGRM ( ) Delete  
Name: BEASLEY, RICK  
Address: PO BOX 3060  
City-St-Zip: TUPELO, MS 38803

**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 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: WILLIAM LEATHERS

MGRM

05/07/2007

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