


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 27, 2007 08:00 A
Secretary of State

DOCUMENT # L05000015548 1. Entity Name C M M R SITE DEVELOPMENT, L.L.C.	
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Principal Place of Business 2450 VILLAGE LANE TITUSVILLE, FL 32780	Mailing Address P.O. BOX 2499 TITUSVILLE, FL 32781
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DO NOT WRITE IN THIS SPACE



04252007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 34-2038667	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SHARPE, MICHAEL C
2685 TAMMY DRIVE
MIMS, FL 32754

**DO NOT WRITE
IN THIS SPACE**

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 reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**


9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS TILLER, MICHAEL B 3610 WOOD DUCK DRIVE MIMS, FL 32754
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPT SHARPE, MICHAEL C 2685 TAMMY DRIVE MIMS, FL 32754
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05/14/07-80019-004 55.00

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:  Michael B. Tiller 4-25-07 321-446-7831

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #