

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016792

FILED
Apr 21, 2008
Secretary of State

Entity Name: BY THE PARK DEVELOPMENTS, LLC

Current Principal Place of Business:

431 SOUTH CREEK DRIVE
OSPREY, FL 34229 US

New Principal Place of Business:

Current Mailing Address:

431 SOUTH CREEK DRIVE
OSPREY, FL 34229 US

New Mailing Address:

P.O. BOX 1387
OSPREY, FL 34229 US

FEI Number: 20-2474439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILBERSTEIN, DAVID M
50 CENTRAL AVENUE, SUITE 700
THE PLAZA BUILDING
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

SILBERSTEIN, DAVID M
50 CENTRAL AVE., STE. 700
SARASOTA, FL 34236 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: DAVID M. SILBERSTEIN

04/21/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: NUTTEN, THOMAS
Address: 431 SOUTH CREEK DRIVE
City-St-Zip: OSPREY, FL 34229 US

Title: MGR () Delete
Name: NUTTEN, DANIELLE
Address: 431 SOUTH CREEK DRIVE
City-St-Zip: OSPREY, FL 34229 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NUTTEN, THOMAS
Address: P.O. BOX 1387
City-St-Zip: OSPREY, FL 34229 US

Title: MGR (X) Change () Addition
Name: NUTTEN, DANIELLE
Address: P.O. BOX 1387
City-St-Zip: OSPREY, FL 34229 US

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: DANIELLE NUTTEN

MGR

04/21/2008

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