


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000045656 1. Entity Name FREDE DEVELOPMENT, LLC	
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Principal Place of Business 3290 WEST STATE ROAD 46 SANFORD, FL 32771	Mailing Address 3290 WEST STATE ROAD 46 SANFORD, FL 32771
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DO NOT WRITE IN THIS SPACE



01112008No Chg-LLC CR2E083 (12/07)

4. FEI Number NOT APPLICABLE	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

BARKIN, MARSHALL H
 149 S. RIDGEWOOD AVE., SUITE 710
 DAYTONA BEACH, FL 32114

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUDSON, C. FRED III 3290 WEST STATE ROAD 46 SANFORD, FL 32771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HODGE, W. DESHON P.O. BOX 506 MORRISVILLE, NC 27560
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 02/18/08-80041-014 138.75

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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: W. Althod MANAGING MEMBER 2/4/08 919-433-0744
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #