

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Feb 12, 2007 8:00 am
Secretary of State**

01-17-2007 90047 029 ****50.00

DOCUMENT # L05000048083

1. Entity Name
OTTERVALE DEVELOPMENTS, LLC



Principal Place of Business
**232 GREENCOVE RD.
VENICE, FL 34292 US**

Mailing Address
**232 GREENCOVE RD.
VENICE, FL 34292 US**

00000400



DO NOT WRITE IN THIS SPACE

01102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-3407919

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**HIBBERD, JULIE
232 GREENCOVE RD.
VENICE, FL 34292**

**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 J HIBBERD (NOTE: Registered Agent signature required when reinstating) DATE 1/10/07

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HIBBERD, JULIE 232 GREENCOVE RD. VENICE, FL 34292
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ROBERTS, PAULINE 232 GREENCOVE RD. VENICE, FL 34292
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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: P R Roberts DATE 1/10/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #