

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000050965

FILED
Apr 18, 2007
Secretary of State

Entity Name: TODD KING DEVELOPMENTS, LLC

Current Principal Place of Business:

12945 SEMINOLE BLVD
BLDG 2, SUITE 16
LARGO, FL 33778 US

New Principal Place of Business:

12945 SEMINOLE BLVD
BLDG 2, SUITE 16
SEMINOLE, FL 33778 US

Current Mailing Address:

12945 SEMINOLE BLVD
BLDG 2, SUITE 16
LARGO, FL 33778 US

New Mailing Address:

12945 SEMINOLE BLVD
BLDG 2, SUITE 16
SEMINOLE, FL 33778 US

FEI Number: 20-2933837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEMO, RICK
12945 SEMINOLE BLVD
BLDG 2, SUITE 16
LARGO, FL 33778 US

Name and Address of New Registered Agent:

CLEMO, RICK
12945 SEMINOLE BLVD
BLDG 2, SUITE 16
SEMINOLE, FL 33778 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:

04/18/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CLEMO, RICK
Address: 12503 PALOMINO CT
City-St-Zip: TAMPA, FL 33626

Title: MGRM () Delete
Name: WALTER, TRACY
Address: 577 NORMANDY RD
City-St-Zip: MADEIRA BEACH, FL 33708

ADDITIONS/CHANGES:

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 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: TRACY G WALTER

MGRM

04/18/2007

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