


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90316 021 ****55.00

DOCUMENT # L05000063986	
1. Entity Name A-Z DEVELOPMENT, LLC.	

Principal Place of Business 3816 UPLAND PL. VALRICO, FL 33594	Mailing Address 3816 UPLAND PL. VALRICO, FL 33594
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2. Principal Place of Business - No P.O. Box # 2805 NESMITH ESTATE LANE	3. Mailing Address 2805 NESMITH ESTATE LANE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State PLANT CITY FL.	City & State PLANT CITY FL.
Zip 33563	Country USA
Zip 33563	Country USA

04282007 Chg-LLC CR2E083 (12/06)

4. FEI Number 37-1512180	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent ZAPPIA, ANTHONY 3816 UPLAND PL. VALRICO, FL 33594	
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7. Name and Address of New Registered Agent	
Name ANTHONY ZAPPIA	
Street Address (P.O. Box Number is Not Acceptable) 2805 NESMITH ESTATE LANE	
City PLANT CITY	FL Zip Code 33563

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 ANTHONY ZAPPIA <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE 4-20-07 <small>(NOTE: Registered Agent signature required when registering)</small>

Filing Fee is \$50.00 Due by May 1, 2007	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ZAPPIA, JOSEPH 1277 RAHWAY AVE AVENEL, NJ 07001 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ZAPPIA, MICHAEL 47 SWARTHMORE DR CARTERET, NJ 07008 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ZAPPIA, FRANK 200 MIDWOOD WAY COLONIA, NJ 07067 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CARVALHO, MARIA Z 210 YVONNE WAY STEWARTSVILLE, NJ 08886 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ANTHONY ZAPPIA 2805 NESMITH ESTATE LANE PLANT CITY FL. 33563 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CATERINA ZAPPIA 7209 COUNTY LINE RD. PLANT CITY FL. 33567 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ANTONIO ZAPPIA 7209 COUNTY LINE RD. PLANT CITY FL. 33567 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CARMEN ZAPPIA 15 FLORENCE ST. NUTLEY NJ 07110 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

Anthony Zappia

4/20/07