

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000063986

FILED
Apr 21, 2009
Secretary of State**Entity Name:** A-Z DEVELOPMENT, LLC.**Current Principal Place of Business:**2805 NESMITH ESTATES LANE
PLANT CITY, FL 33566**New Principal Place of Business:****Current Mailing Address:**2805 NESMITH ESTATES LANE
PLANT CITY, FL 33566**New Mailing Address:****FEI Number:** 37-1512180**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ZAPPIA, ANTHONY
2805 NESMITH ESTATES LANE
PLANT CITY, FL 33566 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: ZAPPIA, JOSEPH
Address: 1277 RAHWAY AVE
City-St-Zip: AVENEL, NJ 07001**Title:** MGRM () Delete
Name: ZAPPIA, MICHAEL
Address: 29 HARRISON AVE
City-St-Zip: CARTERET, NJ 07008**Title:** MGRM () Delete
Name: ZAPPIA, FRANK
Address: 54 STAFFORD RD
City-St-Zip: COLONIA, NJ 07067**Title:** MGRM () Delete
Name: CARVALHO, MARIA Z
Address: 210 YVONNE WAY
City-St-Zip: STEWARTSVILLE, NJ 08886**Title:** MGR () Delete
Name: ZAPPIA, ANTHONY
Address: 2805 NESMITH ESTATES LANE
City-St-Zip: PLANT CITY, FL 33566**Title:** MGRM () Delete
Name: ZAPPIA, CARMEN
Address: 15 FLORENCE ST
City-St-Zip: NUTLEY, NJ 07110**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGR (X) Change () Addition
Name: ZAPPIA, CATERINA
Address: 7209 COUNTY LINE RD
City-St-Zip: PLANT CITY, FL 33567**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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 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: ANTHONY ZAPPIA

MGR

04/21/2009

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