


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 01, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000068789 1. Entity Name TRUE BLUE DEVELOPMENT LLC	
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Principal Place of Business 717 N D STREET LAKE WORTH, FL 33460 US	Mailing Address 717 N D STREET LAKE WORTH, FL 33460 US
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DO NOT WRITE IN THIS SPACE



02242007No Chg-LLC

CR2E083 (11/05)

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

**LILLEY, BARBARA A
717 N D STREET
LAKE WORTH, FL 33460**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

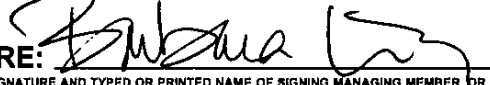
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LILLEY, BARBARA 717 N D STREET LAKE WORTH, FL 33460
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBINS, GEORGE 723 CONNESSTEE ROAD WEST PALM BEACH, FL 33413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LILLEY, RENATE S 717 N D STREET LAKE WORTH, FL 33460
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBINS, DAWN 723 CONNESSTEE RD WEST PALM BEACH, FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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03/12/07-80015-004 50.00

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:  **2/28/07** **561-644-1041**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #