

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State

04-04-2008 90134 004 ***138.75

DOCUMENT # L05000085423 1. Entity Name NDN DEVELOPMENT, LLC					
Principal Place of Business 2490 BROAD ST BROOKSVILLE, FL 34604			Mailing Address 401 S ALBANY AVE TAMPA, FL 33606		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		03192008 Chg-LLC CR2E083 (12/06)	
4. FEI Number 20-3398549				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent STEINER, NELSON C 401 S ALBANY AVE TAMPA, FL 33606				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FERRARO, NICK 6030 ULMERTON RD CLEARWATER, FL 33760	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Ferraro, Nick 6030 Ulmerton Rd Clearwater, FL 33760
		☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STEINER, NELSON C 401 S ALBANY AVE TAMPA, FL 33606	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BICZ, DAN 2490 BROAD ST BROOKSVILLE, FL 34604	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BARFIELD, JIMI 2490 BROAD ST BROOKSVILLE, FL 34604	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Barfield, Jimi 2490 Broad St Brooksville, FL 34604
		☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		☐ Change ☐ 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: _____ Nelson C Steiner 4-1-08 (813) 350-9399 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					

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