

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093754

Entity Name: S&P DEVELOPMENTS LLC

FILED
May 03, 2009
Secretary of State

Current Principal Place of Business:

6601 SHUTTLE WAY #E
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

3300 CRESCENT OAKS BLVD
TARPON SPRINGS, FL 34688

Current Mailing Address:

POB 1358
CAPE CANAVERAL, FL 32920

New Mailing Address:

4641 BARCHETTA DR
LAND O LAKES, FL 34639

FEI Number: 20-3548971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STAFFORD, WILLIAM F
6601 SHUTTLE WAY #E
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

STAFFORD, WILLIAM F
4641 BARCHETTA DR
LAND O LAKES, FL 34639 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:

05/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STAFFORD, WILLIAM F
Address: 6601 SHUTTLE WAY #E
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: MGRM () Delete
Name: PRALL, STEPHEN M
Address: 3516 CORNWALL SQ DR
City-St-Zip: TAMPA, FL 33569

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STAFFORD, WILLIAM F
Address: 4641 BARCHETTA DR
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM (X) Change () Addition
Name: PRALL, STEPHEN M
Address: 4641 BARCHETTA DR
City-St-Zip: LAND O LAKES, FL 34639

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: WILLIAM STAFFORD

MGRM

05/03/2009

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