

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122092

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: J&D DEVELOPMENT MERRITT ISLAND, LLC

**Current Principal Place of Business:**

2419 E. COMMERCIAL BOULEVARD, SUITE 100  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

2419 E. COMMERCIAL BOULEVARD, SUITE 100  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 20-4000559      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BLODIG, GREGORY J  
100 W. CYPRESS CREEK ROAD, SUITE 700  
FORT LAUDERDALE, FL 33309      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: MGR      ( ) Delete  
Name: LAMBERT, DANIEL  
Address: 2419 E. COMMERCIAL BOULEVARD, SUITE 100  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR      ( ) Delete  
Name: VERILLO, JAMES  
Address: 2419 E. COMMERCIAL BOULEVARD, SUITE 100  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES:**

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: DANIEL LAMBERT

MGR

02/25/2009

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