

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000024313

FILED
Aug 10, 2007
Secretary of State

Entity Name: PITTS DEVELOPMENT, LLC

Current Principal Place of Business:

7825 BAYMEADOWS WAY
SUITE 310A
JACKSONVILLE, FL 32256

New Principal Place of Business:

7807 BAYMEADOWS ROAD E
SUITE 403
JACKSONVILLE, FL 32256

Current Mailing Address:

7825 BAYMEADOWS WAY
SUITE 310A
JACKSONVILLE, FL 32256

New Mailing Address:

7807 BAYMEADOWS ROAD E
SUITE 403
JACKSONVILLE, FL 32256

FEI Number: 20-1879398 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:

PITTS, SUSAN C
3825 BAYMEADOWS WAY
SUITE 310A
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

PITTS, SUSAN C
7807 BAYMEADOWS ROAD E
SUITE 403
JACKSONVILLE, FL 32256 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:

08/10/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: PITTS, WILLIAM G MGR
Address: 7807 BAYMEADOWS RD E SUITE 403
City-St-Zip: JACKSONVILLE, FL 32256

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 G PITTS

MGR

08/10/2007

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