

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099880

FILED
May 22, 2008
Secretary of State

Entity Name: IDEAL DEVELOPMENT OF FLORIDA, LLC

Current Principal Place of Business:

8841 COLLEGE PARKWAY
SUITE 105
FORT MYERS, FL 33919

New Principal Place of Business:

1406 SE 46TH LANE
SUITE 6
CAPE CORAL, FL 33904

Current Mailing Address:

8841 COLLEGE PARKWAY
SUITE 105
FORT MYERS, FL 33919

New Mailing Address:

1406 SE 46TH LANE
SUITE 6
CAPE CORAL, FL 33904

FEI Number: 20-5706093 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:

NOVICKI, WALTER J
2818 SW 49TH TERRACE
CAPE CORAL, FL 33914 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: PRES () Delete
Name: NOVICKI, WALTER J
Address: 8841 COLLEGE PARKWAY SUITE 105
City-St-Zip: FORT MYERS, FL 33919

Title: VP () Delete
Name: BAKUN, DAVID
Address: 8841 COLLEGE PARKWAY STE 105
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: NOVICKI, WALTER J
Address: 1406 SE 46TH LANE #6
City-St-Zip: CAPE CORAL, FL 33904

Title: VP (X) Change () Addition
Name: BAKUN, DAVID
Address: 1406 SE 46TH LANE #6
City-St-Zip: CAPE CORAL, FL 33904

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: WALTER J NOVICKI

PRES

05/22/2008

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