

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000045059

Entity Name: 12345 DEVELOPMENT, LLC

FILED
Apr 01, 2008
Secretary of State

Current Principal Place of Business:

14270 ROYAL HARBOR CT, UNIT 423
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

14270 ROYAL HARBOR CT, UNIT 423
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 26-1463156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEIR, DALLER
14133 BENTLY CIR
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

MEIR, DALLER
14270 ROYAL HARBOUR COURT
423
FORT MYERS, FL 33908 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:

04/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DALLER, MEIR
Address: 14133 BENTLY CIR
City-St-Zip: FORT MYERS, FL 33912 US

Title: MGRM () Delete
Name: AIHARA, RIE
Address: 14133 BENTLY CIR
City-St-Zip: FORT MYERS, FL 33912 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DALLER, MEIR
Address: 14270 ROYAL HARBOUR COURT #423
City-St-Zip: FORT MYERS, FL 33908 US

Title: MGRM (X) Change () Addition
Name: AIHARA, RIE
Address: 14270 ROYAL HARBOUR COURT #423
City-St-Zip: FORT MYERS, FL 33908 US

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: MEIR DALLER

MGRM

04/01/2008

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