

1062

L07000047843

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2008 AUG -1 A 10: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # L07000047843					
1. Entity Name CENTRAL FLORIDA COMMUNITY & ECONOMIC DEVELOPMENT, LLC					
Principal Place of Business 847 ORANGE AVENUE DAYTONA BEACH, FL 32114 US			Mailing Address P.O. BOX 15065 DAYTONA BEACH, FL 32115-5065 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-8973138	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CHESTER, GERALD O 211 N. RIDGEWOOD, SUITE 114 DAYTONA BEACH, FL 32114			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
FILE NOW!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGRM ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	CENTRAL FLORIDA COMMUNITY DEVELOPMENT CORP	NAME			
STREET ADDRESS	847 ORANGE AVENUE	STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH, FL 32114	CITY-ST-ZIP			
TITLE	MGR ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	CHESTER, GERALD O	NAME			
STREET ADDRESS	847 ORANGE AVENUE	STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH, FL 32114	CITY-ST-ZIP			
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 for the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE:		Gerald O. Chester		5/28/08 (356) 226-1216	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date		Daytime Phone #	

2062



Housing Services

P.O. Box 15065
Daytona Beach, Florida 32115
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Outside Daytona Beach Area • 1.866.253.3232
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ATTACHMENT

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June 27, 2008

o
Division of Corporation
P.O. Box 6478
Tallahassee, FL 32314

RE: Central Florida Community & Economic Development (L07000047843)

Dear Sir or Madam:

Please find attached the form (which included the Federal Employer Identification number in block 4. Please note that the filing fee was recorded on the form as paid on May 14, 2008.

Should you have any questions, I may be reached at (386) 226-1216.

Sincerely,

Christine Chitan
Executive Assistant