

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049931

FILED  
Apr 17, 2008  
Secretary of State

**Entity Name:** GLOBAL COMMUNITY DEVELOPMENT, LLC

**Current Principal Place of Business:**

1202 S.E. 8TH PLACE, SUITE A  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

1202 S.E. 8TH PLACE, SUITE A  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 26-0181302

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

R & A AGENTS, INC.  
ATTN: DONNA M. FLAMMING, ESQ.  
2320 FIRST STREET, SUITE 1000  
FORT MYERS, FL 33901 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: YOUNGER, LESLIE  
Address: 1202 S.E. 8TH PLACE, SUITE A  
City-St-Zip: CAPE CORAL, FL 33990

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CUMMINGS, LESLIE  
Address: 1202 S.E. 8TH PLACE, SUITE A  
City-St-Zip: CAPE CORAL, FL 33990

Title: MGRM ( ) Change (X) Addition  
Name: CUMMINGS, BRYON S  
Address: 1202 SE 8TH PL SUITE A  
City-St-Zip: CAPE CORAL, FL 33990

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:** BRYON CUMMINGS

MGRM

04/17/2008

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