

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000004637

FILED  
Jan 18, 2012  
Secretary of State

**Entity Name:** PROPERTY DEVELOPMENT AND RENOVATORS GROUP LLC

**Current Principal Place of Business:**

1247 WHITE OAK CIRCLE  
MELBOURNE, FL 32934

**New Principal Place of Business:**

**Current Mailing Address:**

1247 WHITE OAK CIRCLE  
MELBOURNE, FL 32934

**New Mailing Address:**

FEI Number: 27-4560149

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PHILLIPS, JERRY P  
1069 PINEAPPLE AVENUE NE  
PALM BAY, FL 32905 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: MGRM  
Name: LEA, RAY S  
Address: 927 WHISPERPINE DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: MGRM  
Name: ROACH, DAVID D  
Address: 2651 ENGLEWOOD DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: MGRM  
Name: STEWART, RONALD E  
Address: 1247 WHITE OAK CIRCLE  
City-St-Zip: MELBOURNE, FL 32934

Title: MGRM  
Name: BISHOP, RONALD  
Address: 1240 CAMPO AVENUE NW  
City-St-Zip: PALM BAY, FL 32907

Title: MGRM  
Name: JENKINS, JIMMIE L  
Address: 1259 CAMAS AVENUE NW  
City-St-Zip: PALM BAY, FL 32907

Title: MGRM  
Name: PERKINS, KEVIN L  
Address: 1247 WHITE OAK CIRCLE  
City-St-Zip: MELBOURNE, FL 32934

I hereby 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: RONALD E. STEWART

MGRM

01/18/2012

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