2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L94000000584

1. Entity Name
VILLAGE DEVELOPERS, L.C.

FILED Apr 30, 2005 08:00 AM Secretary of State

Principal Place of Business

37 NORTH CLEVELAND STREET QUINCY, FL 32351

Mailing Address

37 NORTH CLEVELAND STREET QUINCY, FL 32351



03012005 No Chg-LLC

CR2E083 (10/03)

Fee Required

4. FEI Number Applied For 59-3276770 Not Applicable

5. Certificate of Status Desired

5. S5.00 Additional

6. Name and Address of Current Registered Agent

GEEKER, VAN P 1501 PARK AVENUE EAST TALLAHASSEE, FL 32301

NAME STREET ADDRESS CITY - ST - ZIP

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	named entity submits this statement for the purpose of char tions of registered agent.	nging its registere	d office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.				
Signature, typed or printed name of registered agent and title if applicable.		(NOTE, Registered Agent signature required when reinstaling) DATE		
Fi D	iling Fee is \$50.00 ue by May 1, 2005			
9.	MANAGING MÉMBERS/MANAGERS		<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAWRENCE REALTY, INC. 37 N. CLEVELAND STREET QUINCY, FL 32351			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U00000350060 05/02/05-80090-010 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET AODRESS CHY-ST-ZIP		6-2. <u></u>	IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP				
TITLE				

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 4/78/65 950-875-8470
SIGNATURE AND TYPED OR PRINTED HAME OF SIGNACUM MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daysme Phone #