HOLYFIELD & THOMAS, LLC

## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **DOCUMENT # L97000001223** 1. Entity Name UCCI DEVELOPMENT COMPANY, L.L.C. Mailing Address Principal Place of Business 213 SOUTHERN BLVD. 213 SOUTHERN BLVD. WEST PALM BEACH, FL 33405 WEST PALM BEACH, FL 33405 2. Principal Place of Business 3. Making Acdress % Holyfield & Thomas, LLC % Holyfield & Thomas, LLC Suite, Apt. #, stc. Suite. Apr. #. etc. 04222 601 Forum Place, Ste 801 1601 Forum Place. Ste 80 4. FEI City & State Çîty & Stare West Palm Bch, FL 33401 FL 33401 West Palm Bch, 65 Country Zip Country Ziú 5. Cer 7. Nan 6. Name and Address of Current Registered Agent David J. Th CLARKE, JAMES W Street Address (P.O. Box 213 SOUTHERN BLVD. WEST PALM BEACH, FL 33405 1601 Forum CityWest Palm I 8. The above named chilly sugmits this seatement for the purpose of changing its registered office or registered agen the obligations of registered agent. Filling Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 10. 9. MGR C Selate TITLE TALE SUNBIRD DEVELOPMENTS LTD. NUMBE MARKE 1601 Fo 213 SOUTHERN BLVD. STREET ADDRESS STREET ADDRESS West Pa WEST PALM BEACH, FL 33405 CITY-ST-ZIP CITY-ST-ZP TILE ☐ Oalele TITLE SKYBIRD DEVELOPMENTS, LTD. NAME MALK 1601 Fo STREET ADDRESS 213 SOUTHERN BLVD. STREET ADDRESS West Pa City-ST-21P CITY-51-77P WEST PALM BEACH, FL 33405 Oelete TITLE TIPLE NAME HALLE STREET ADDRESS STREET AUTORESS CITY-ST-21 CITY-ST-2P Delete TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-RP CITY-ST-ZIP TITLE Deleta TITLE NAME MAME STREET ACCIPESS STREET ADDRESS C(TY-ST-Z)2 CITY-ST.ZHP nne TOLE ☐ Celesa NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-21F CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 11 indicated on this report is true and accurate and that my signature shall have the same legal effect as if made unformated liability company or the receiver or trustee empowered to execute this report as required by Chapter 608. 1/26/00

SIGNATURE: SIGNATURE AND TYPED OR PRESTED HAME OF SECUND MEMBER, MANAGER, OR ALF MORESE REPRESENTATIVE

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## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L9700001223  1. Entity Name UCCI DEVELOPMENT COMPANY, L.L.C.								_	•		
213 SOUTHE WEST PALM	BEACH, FL 33405	Mailing Address 213 SOUTHERN BLVD. WEST PALM BEACH, FL 33405			ATTACHMENT 36205128						
2: Principal Place of Business % Holyfield & Thomas, LLC % Holyfield & Tho Suite, Apt. #, etc. 3. Mailing Address % Holyfield & Tho Suite, Apt. #, etc.				mas, LI	CC						
1601 F City & Stat	orum Place, Ste 801	1601 Forum Place, Ste 801 City & State West Palm Bch, FL 33401		01	4. FEI Num	ber	_C	CR2E0	<del></del>	plied For	
Zip	Country	Zip Cou			5. Certificate of Status E		esired	ired Sired See Required			
	6. Name and Address of Current F	legistered Agent			1.		nd Address o				
CLARKE,	JAMES W			Name David J. Thomas, CPA							
213 SOUTHERN BLVD. WEST PALM BEACH, FL 33405				Street Address (P.O. Box Number is Not Acceptable)							
				1601 Forum Place, Ste 801  CityWest Palm Beach Zip Code.							
R The above	named entity submits this statement for	the pulmore of changing its	rogietoro					oto of Elo	FL	Zip Code 334(	
	tions of registered agent	Are purpose of changing its	-	ad office of reg	gistere	d agent, or t	John, in the Ja	ate or no	11/20	/	and accept
SIGNATURE!	Signature, typed or printed name of registered agent as	nd title if applicable. (NOTE	: Registered	d Agent signature n	required v	vhen reinstating)			7/26( DATE	<u>øs</u>	<del></del>
Filing Fee is \$50.00 Due by May 1, 2005			. "	71		<u> </u>			e check p Departm	ayable to ent of State	
9.	MANAGING MEMBER		10.				ADD	ITIONS/	CHANGES	7	
TITLE NAME	MGR SUNBIRD DEVELOPMENTS LTD	Delete Delete	TITLE NAME				 			(X) Change	Addition
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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: Della chief ong 4/2405											
	SIGNATURE AND TYPED OR PRINTED NAME OF	CICNING MANAGING MEMBER MAN	AGED OD	AUTH DIZED DE	DDESEN	TATIVE	Date			aytime Phone #	