

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # L99000006828

1. Entity Name
MARTIN PROPERTY DEVELOPMENT, LLC



Principal Place of Business

**210 CESSNA BLVD
SUITE 1
PORT ORANGE, FL 32128 US**

Mailing Address

**210 CESSNA BLVD
SUITE 1
PORT ORANGE, FL 32128 US**



01122008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3635601

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ERTEL, BENNY
210 CESSINA BLVD STE 1
PORT ORANGE, FL 32128**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MARTIN, MARK A
STREET ADDRESS	210 CESSNA BLVD SUITE 1
CITY-ST-ZIP	PORT ORANGE, FL 32128
TITLE	MGRM
NAME	MARTIN, ARLENE E
STREET ADDRESS	210 CESSNA BLVD SUITE 1
CITY-ST-ZIP	PORT ORANGE, FL 32128
TITLE	MGRM
NAME	ERTEL, BENNY
STREET ADDRESS	210 CESSNA BLVD SUITE 1
CITY-ST-ZIP	PORT ORANGE, FL 32128
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000794621
01/28/08-80015-007 138.75

**DO NOT WRITE
IN THIS SPACE**

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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Mark A. Martin

1/14/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #