2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M97000000006

t. Entity Name

CENTRAL SOUTHEAST-WEST DEVELOPMENT L.C.



FILED
May 04, 2004 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

31731 NORTHWESTERN HIGHWAY, SUITE 250W FARMINGTON HILLS, MI 48334

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01082004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number	Applied For	
38-3149405	 Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LUPTAK, PAOLA M 4700 NW BOCA RATON BLVD, 4TH FLOOR BOCA RATON, FL 33431

DO NOT WRITE IN THIS SPACE

		114 1131	3 SFACE
	named enlity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or both, in the	e State of Florida II am (amiliar with, and accept
SIGNATURE.	Signature Typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE
F) D	iling Fee is \$50.00 ue by May 1, 2004		
9.	MANAGING MEMBERS/MANAGERS		
NAME STREET ADDRESS CITY - S1 - ZIP	MGRM BEZNOS, HAROLD 31731 NORTHWESTERN HWY. #250 W FARMINGTON HILLS, MI 48334	05/	V00000155291 /05/04-80031-011 50. 00
TITLE NAME STREET ADDRESS CITY ST ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		DO NO	OT WRITE
TITLE NAME STREET ADDRESS CHY-ST-ZIP		IN TH	IS SPACE
I-TLE NAME STREET ADDRESS CITY-ST ZIP			
MAME SIREET ADDRESS			

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 reactive or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE:

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

arold Sezaos

Daytime Phone #