

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # L06000023397

1. Entity Name
 LANDLINK GROUP, LLC



Principal Place of Business
 220 CRYSTAL GROVE BLVD
 LUTZ, FL 33548 US

Mailing Address
 220 CRYSTAL GROVE BLVD
 LUTZ, FL 33548 US



03102008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4425723	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GIOVINCO, IAN S
 16017 N FLORIDA AVE
 SUITE 125
 LUTZ, FL 33549

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

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

U00000911981
 05/07/08-80062-005 288.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AZIZ, STEFFEN 3817 LAKE JOYCE DRIVE LAND O'LAKES, FL 34639
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SOTOMAYOR, NATALIE J 28727 DARBY ROAD DADE CITY, FL 33525
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STROMSNES, TIMOTHY B 2313 TOWERY TRAIL LUTZ, FL 33549
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: 3/10/08 (813) 949-0366
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #