

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000042578

FILED
Mar 07, 2008
Secretary of State

Entity Name: LANDMARK REALTY RESIDENTIAL, LLC

Current Principal Place of Business:

26 S BROOKSVILLE AVENUE
BROOKSVILLE, FL 34601 US

New Principal Place of Business:

Current Mailing Address:

26 S BROOKSVILLE AVENUE
BROOKSVILLE, FL 34601 US

New Mailing Address:

FEI Number: 01-3267285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SELWAY, JOSEPH
22290 GREEN VALLEY TRAIL
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JOSEPH SELWAY FAMILY, , LLC
Address: 22290 GREEN VALLEY TRAIL
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: MGR () Delete
Name: CHERYL M. SELWAY FAM, ILY, LLC
Address: 22290 GREEN VALLEY TRAIL
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: NICHOLSON, WILLARD B JR
Address: 4348 SOUTHPOINT BLVD., STE. 100
City-St-Zip: JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOSEPH SELWAY

MGR

03/07/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date