

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000005481

Entity Name: 422 WOODLAND, LLC

FILED  
Feb 24, 2009  
Secretary of State

## Current Principal Place of Business:

444 SEABREEZE BLVD.  
SUITE 780  
DAYTONA BEACH, FL 32118 US

## Current Mailing Address:

444 SEABREEZE BLVD.  
SUITE 780  
DAYTONA BEACH, FL 32118 US

FEI Number: 20-4220618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADAMS, ROBERT L  
444 SEABREEZE BLVD 170  
DAYTONA BEACH, FL 32118 US

## New Principal Place of Business:

444 SEABREEZE BLVD.  
SUITE 170  
DAYTONA BEACH, FL 32118 US

## New Mailing Address:

444 SEABREEZE BLVD.  
SUITE 170  
DAYTONA BEACH, FL 32118 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: ADAMS, JOHN J  
Address: 444 SEABREEZE BLVD STE 170  
City-St-Zip: DAYTONA BEACH, FL 32118 US

Title: MGR ( ) Delete  
Name: ROBERT L. ADAMS REVO, CABLE TRUST OF 5/13/05  
Address: 444 SEABREEZE BLVD STE 170  
City-St-Zip: DAYTONA BEACH, FL 32118 US

## ADDITIONS/CHANGES:

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

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

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: ROBERT L. ADAMS

MGR

02/24/2009

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