

06 SEP 14 AM 10:06

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|--|---------------------------|---|-------------------------------------|---|----------------|
| DOCUMENT # A26731 1. Entity Name LAND AMERICA INVESTMENT FUND I, LTD. | |  | | <div>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 06 SEP 14 AM 10:06</div> <div></div> | |
| Principal Place of Business 1355 W. PALMETTO PARK RD. #260 BOCA RATON, FL 33486 | | Mailing Address 1355 W. PALMETTO PARK RD. #260 BOCA RATON, FL 33486 | | <div></div> <div>09072006 Chg-LP CR2E003 (11/05)</div> | |
| 2. Principal Place of Business | | 3. Mailing Address | | 4. FEI Number 65-0044797 | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | Applied For Not Applicable | |
| City & State | | City & State | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| Zip | Country | Zip | Country | | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | |
| KUNE, JEFF 1355 W. PALMETTO PARK RD. #260 BOCA RATON, FL 33486 | | | | Name | |
| | | | | Street Address (P.O. Box Number is Not Acceptable) | |
| | | | | | |
| | | | | City | FL Zip Code |
| 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | | | | |
| <div>FILE NOW!!! FEE IS \$500.00 Due by September 15, 2006</div> <div>In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.</div> | | | | | |
| A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. | | | | | |
| 12. GENERAL PARTNER INFORMATION | | | 13. ADDRESS CHANGES ONLY | | |
| DOCUMENT # | P93000046485 | | STREET ADDRESS | 1355 W. PALMETTO PARK RD SUITE 260 | |
| NAME | L.A.G.P. INC. | | CITY-ST-ZIP | BOCA RATON, FL 33486 | |
| STREET ADDRESS | 1355 W. PALMETTO PARK RD. | | | | |
| CITY-ST-ZIP | BOCA RATON, FL 33486 | | | | |
| DOCUMENT # | | | STREET ADDRESS | | |
| NAME | | | CITY-ST-ZIP | | |
| STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | |
| DOCUMENT # | | | STREET ADDRESS | 100080041441 | |
| NAME | | | CITY-ST-ZIP | 09/21/06--01055--025 **500.00 | |
| STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | |
| DOCUMENT # | | | STREET ADDRESS | | |
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| NAME | | | CITY-ST-ZIP | | |
| STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | |
| 14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes | | | | | |
| SIGNATURE:  | | | JEFFREY D. KUNE 9/7/06 561-350-4344 | | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER | | | Date Daytime Phone # | | |