

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000172

Entity Name: LANDDESIGN, INC.

FILED
Feb 06, 2006
Secretary of State

Current Principal Place of Business:

223 N. GRAHAM ST
CHARLOTTE, NC 28202 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 36959
CHARLOTTE, NC 28236 US

New Mailing Address:

FEI Number: 56-1602942 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAYLOR, DAVID R
302 KNIGHTS RUN AVENUE
SUITE 110
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BEST, LARRY W
Address: YOUNGS ROAD
City-St-Zip: SOUTHERN PINES, NC 28387

Title: P () Delete
Name: DAVIS, BRADLEY W
Address: 2720 PICARDY PLACE
City-St-Zip: CHARLOTTE, NC 28209

Title: V () Delete
Name: CROWLEY, PETER R
Address: 155 WEST NELSON AVENUE
City-St-Zip: ALEXANDRIA, VA

Title: V () Delete
Name: KISER, DWIGHT
Address: 103 CENTURY OAK DR
City-St-Zip: FRANKLIN, TN 39069

Title: V () Delete
Name: SCHWEITZER, EDWARD
Address: 5227 CRESSINGHAM COURT
City-St-Zip: CHARLOTTE, NC

Title: V () Delete
Name: JORDAN, STEPHEN M
Address: 8 WEST WYATT AVE
City-St-Zip: ALEXANDRIA, VA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
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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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHANIE POWELL

CFO

02/06/2006

Electronic Signature of Signing Officer or Director

Date