2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000172

Entity Name: LANDDESIGN, INC.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 223 N. GRAHAM ST CHARLOTTE, NC 28202 US **Current Mailing Address: New Mailing Address:** P.O. BOX 36959 CHARLOTTE, NC 28236 US FEI Number: 56-1602942 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDERSON, RONALD GREGORY, ROBBIN 615 CHANNELSIDE DRIVE 615 CHANNELSIDE DRIVE SUITE 201 SUITE 201 TAMPA, FL 33602 US TAMPA, FL 33602 US 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: ROBBIN GREGORY 01/14/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BEST, LARRY W Name: Name: YOUNGS ROAD Address: Address: City-St-Zip: SOUTHERN PINES, NC 28387 City-St-Zip: Title: Title: () Delete () Change () Addition Name: POWELL, STEPHANIE C Name: **68 SCIOTO LANE** Address: Address: PINEHURST, NC 28374 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition CROWLEY, PETER R Name: Name: 155 WEST NELSON AVENUE Address: Address: City-St-Zip: ALEXANDRIA, VA City-St-Zip: Title: () Delete Title: () Change () Addition KISER, DWIGHT Name: Name: Address: 103 CENTURY OAK DR Address: City-St-Zip: City-St-Zip: FRANKLIN, TN 39069 Title: Title: () Delete () Change () Addition SCHWEITZER, EDWARD Name: Name: 5227 CRESSINGHAM COURT Address: Address: City-St-Zip: CHARLOTTE, NC City-St-Zip: Title: () Delete Title: (X) Change () Addition JORDAN, STEPHEN M Name: Name: WAUGH, RAYMOND 8 WEST WYATT AVE Address: Address: AYSHIRE LANE City-St-Zip: ALEXANDRIA, VA City-St-Zip: CHARLOTTE, NC

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 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 C. POWELL V 01/14/2009