2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0000000113

Entity Name: RIVER CITY LANDING, L.C.

SANFORD, FL 32771 US

City-St-Zip:

FILED May 24, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1501 S. VOLUSIA AVE. ORANGE CITY, FL 32763 **Current Mailing Address: New Mailing Address:** 1501 S. VOLUSIA AVE ORANGE CITY, FL 32763 FEI Number: 59-3618190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MUSE, JOHN M MUSE, JOHN M 516 STEPHANIE COURT 68 CRÝSTAL DRIVE US LAKE MARY, FL 32746 US DEBARY, FL 32713 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: JOHN M. MUSE 05/24/2004 Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGR () Change () Addition () Delete MUSE, KENNETH W MR. Name: Name: PO BOX 412 PURSLEY DRIVE Address: Address: City-St-Zip: RINGGOLD, GA 30736 US City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition MUSE, CYNTHIA K MRS. Name: Name: Address: PO BOX 412 PURSLEY DRIVE Address: City-St-Zip: RINGGOLD, GA 30736 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition NEELEY, ANGELA P MRS. Name: Name: 305 TEMPLE DRIVE Address: Address: City-St-Zip: SANFORD, FL 32771 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MUSE, JOHN M MR. Name: Address: 516 STEPHANIE COURT Address: City-St-Zip: LAKE MARY, FL 32746 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition MUSE, PANIT MRS. Name: Name: 516 STEPHANIE COURT Address: Address: City-St-Zip: LAKE MARY, FL 32746 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition NEELEY, TROY A MR. Name: Name: Address: 305 TEMPLE DRIVE Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: JOHN M. MUSE MGRM 05/24/2004