2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0000000113

Entity Name: RIVER CITY LANDING, L.C.

305 TEMPLE DRIVE

SANFORD, FL 32771 US

Address:

City-St-Zip:

FILED Aug 31, 2005 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 () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MUSE, JOHN M 68 CRYSTAL DRIVE DEBARY, FL 32713 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition (X) Delete MUSE, KENNETH W MR. Name: Name: Address: PO BOX 412 PURSLEY DRIVE Address: City-St-Zip: RINGGOLD, GA 30736 US City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition Name: NEELEY, ANGELA P MRS. Name: Address: 305 TEMPLE DRIVE Address: City-St-Zip: SANFORD, FL 32771 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition MUSE, JOHN M MR. MUSE, JOHN M MR. Name: Name: 516 STEPHANIE COURT Address: Address: 68 CRYSTAL DRIVE City-St-Zip: LAKE MARY, FL 32746 US City-St-Zip: DEBARY, FL 32713 US Title: MGR () Delete Title: MGR (X) Change () Addition Name: MUSE, PANIT MRS. Name: MUSE, PANIT MRS. 516 STEPHANIE COURT Address: Address: 68 CRYSTAL DRIVE City-St-Zip: LAKE MARY, FL 32746 US City-St-Zip: DEBARY, FL 32713 US Title: MGRM (X) Delete Title: () Change () Addition NEELEY, TROY A MR. Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JOHN M MUSE MGRM 08/31/2005