

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 26, 2001 08:00 AM****Secretary of State****DOCUMENT # L00000001344****1. Entity Name**
MARLIN LAND DEVELOPMENT, L.L.C.

Principal Place of Business 9711 BEACH BLVD. PANAMA CITY BEACH 32408	Mailing Address 9711 BEACH BLVD. PANAMA CITY BEACH 32408
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2. Principal Place of Business 3926 E. 15TH STREET Suite, Apt. #, etc.	3. Mailing Address 3926 E. 15TH STREET Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State SPRINGFIELD FL	City & State SPRINGFIELD FL	4. FEI Number 59-3685089	Applied For <input type="checkbox"/> Not Applicable
Zip 32404	Country US	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent MARITI MARCO 9711 BEACH BLVD. PANAMA CITY BEACH FL 32408	7. Name and Address of New Registered Agent Name MARITI MARCO V Street Address (P.O. Box Number is Not Acceptable) 3926 E. 15TH STREET City SPRINGFIELD FL Zip Code 32404
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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.**SIGNATURE** MARCO V MARITI **04/26/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE**FILE NOW!!! FEE IS \$50.00**
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARITI MARCO V 3926 E. 15TH STREET SPRINGFIELD FL 32404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify 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 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.**SIGNATURE:** MARCO V MARITI **MGRM 04/26/2001**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)