2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2004
Secretary of State

DOCUMENT# L00000002155

Entity Name: VAN LAN DEVELOPMENT, LLC

Current Principal Place of Business:

2334 E. STATE ROAD 200
SUITE 300
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

4670 CARLTON DUNES DR.
#4
AMELIA ISLAND, FL 32034

Current Mailing Address:

2334 E. STATE ROAD 200
SUITE 300
FERNANDINA BEACH, FL 32034

New Mailing Address:

4670 CARLTON DUNES DR.
#4
AMELIA ISLAND, FL 32034

FEI Number: 59-3626912 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAY, JOHATHAN L
1548 LANCASTER TERRACE
JACKSONVILLE, FL 32004 US

Name and Address of New Registered Agent:

LANIER, KEN B
4670 CARLTON DUNES DR.
#4
AMELIA ISLAND, FL 32004 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: KEN B. LANIER 04/05/2004
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: FALCON FAMILY HOLDIN, GS, LP
Address: 4670 CARLTON DUNES DR #4
City-St-Zip: AMELIA ISLAND, FL 32034

Title: MGR ( ) Delete
Name: SIMMONS, VANN
Address: 3 LIVE OAK RD
City-St-Zip: AMELIA ISLAND, FL 32034

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
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 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.

SIGNATURE: KEN B. LANIER MGR 04/05/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date