

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000005002

1. Entity Name
THE OPEN LAND FUND, L.L.C.



Principal Place of Business

**46 SW 1ST STREET
3RD FLOOR
MIAMI, FL 33130**

Mailing Address

**46 SW 1ST STREET
3RD FLOOR
MIAMI, FL 33130**

DO NOT WRITE IN THIS SPACE



01122004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
65-1031679

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**BASS, JEFFREY S
C/O LAW OFFICES OF SHUBIN & BASS PA
46 SW 1ST STREET 3RD FLOOR
MIAMI, FL 33130**

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

**U000000024346
02/02/04-80061-024 150.00**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
SHUBIN, JOHN
46 SW 1ST STREET, 3RD FLOOR
MIAMI, FL 33130**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
BASS, JEFFREY
46 SW 1ST STREET, 3RD FLOOR
MIAMI, FL 33130**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/28/04 / 305 381-6000