2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State
04-29-2004 90076 033 ****50.00

DOCUMENT # L00000008618

1. Entity Name
FAMILY DYNAMICS LAND COMPANY, LLC

Principal Place of Business	Mailing Address
1616 S. 14TH STREET LEESBURG, FL 34748	PO BOX 490180 LEESBURG, FL 34749

04282004 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
1300 CITIZENS BLVD.	1300 CITIZENS BLVD.
Suite, Apt. #, etc.: SUITE 300	Suite, Apt. #, etc.: SUITE 300
City & State: LEESBURG, FL	City & State: LEESBURG, FL
Zip: 34748-3924 Country:	Zip: 34748-3924 Country:

4. FEI Number 59-3660361 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GREGG-STRIMENOS, GAIL
1048 STRIMENOS LANE
LEESBURG, FL 34748

7. Name and Address of New Registered Agent

Name: ROBERT K. WATSON
Street Address (P.O. Box Number is Not Acceptable): 1300 CITIZENS BLVD.
SUITE 300
City: LEESBURG FL Zip Code 34748-3924

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: Robert K Watson ROBERT K. WATSON 4-28-04
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

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREGG ENTERPRISES, INC. 1616 S. 14TH STREET LEESBURG, FL 34748	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FAMILY DYNAMICS, INC. 1300 CITIZENS BLVD., SUITE 300 LEESBURG, FL 34748-3924	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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: Gail Gregg-Strimenos GAIL GREGG-STRIMENOS 4-28-04 (352) 314-3340
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #