2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Jan 12, 2004 08:00 A Secretary of State

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1. Entity Name

CONTINENTAL LAND HOLDINGS, LLC



Principal Place of Business

1861 PLACIDA RD

SUITE 204 ENGLEWOOD, FL 34223 Mailing Address

1861 PLACIDA RD

SUITE 204

ENGLEWOOD, FL 34223



01072004No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1075764 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

8. Name and Address of Current Registered Agent

ITTERSAGEN, SCOTT D ESQ 1861 PLACIDA RD SUITE 204 ENGLEWOOD, FL 34223

STREET ADDRESS CITY -ST -ZIP

STREET ADDRESS CITY-ST-ZIP

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	named entity submits this statement for the purpose of changings of registered agent.	ging its registered	doffice or registered agent, or bo	oth, in the State of Florida. I am fami	liar with, and accept	
SIGNATURE_						
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered	Agent signature required when reinstaling)	DATE		
Fi De	lling Fee is \$50.00 ue by May 1, 2004		er Till Till Fask i Station		eg e det e e e e e e e e e e e e e e e e e	
9.	MANAGING MEMBERS/MANAGERS		· · ·			
title Name Street address CJTY -ST-ZIP	MGRM GUNDERSON, MIKO P 1861 PLACIDA ROAD, #204 ENGLEWOOD, FL 342234949			H00000002997		
title Name Street Address City-St-Zip	MGRM DUFF, JAMES T 8252 WILTSHIRE BLVD PORT CHARLOTTE, FL 33981			U00000002997 01/13/04-90037-0	13 50.00	
title name street address city+st-zip			DO	NOT WRITE		
title Name Street Address City • St - Zip	1.		IN	THIS SPACE		
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11. (hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Provide Statutes. I further certify that the information indicated on this report is true and acquirate 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 of the receiver or trustee impowered to execute this report as required by Chapter 608, Rorida Statutes.

SIGNATURE: //WWW / SUMMEN

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

1-7-04

Daytime Phone #