

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002988

FILED  
Jul 05, 2007  
Secretary of State

**Entity Name:** BINGHAMTON HOUSING GROUP, L.L.C.

**Current Principal Place of Business:**

240 SOUTH PINEAPPLE AVE  
SUITE 701  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

240 SOUTH PINEAPPLE AVE  
SUITE 701  
SARASOTA, FL 34236

**New Mailing Address:**

FEI Number: 65-1081431      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

MOOERS, RICHARD L  
240 SOUTH PINEAPPLE AVE  
SUITE 701  
SARASOTA, FL 34236 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BAND, DAVID S  
Address: 240 S. PINEAPPLE AVENUE  
City-St-Zip: SARASOTA, FL 34236

Title: MGR ( ) Delete  
Name: LANDMARK HOSPITALITY, , LLC  
Address: 240 SOUTH PINEAPPLE AVE  
City-St-Zip: SARASOTA, FL 34236

**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 exemption stated in Chapter 119, 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: KEVIN ZERN

MGR

07/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date