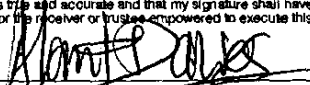


FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91002 048 ****50.00

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000005801			
1. Entity Name LAND BANK LLC			
Principal Place of Business 1210 GEORGE BUSH BLVD. SUITE 3 DELRAY BEACH, FL 33483		Mailing Address 218 NE 11 ST. DELRAY BEACH, FL 33444	
2. Principal Place of Business 7601 N. Federal Hwy		3. Mailing Address PO Box 1797	
City & State Boca Raton FL		City & State Delray Beach FL	
Zip 33487		Zip 33447	
Country USA		Country USA	
4. FEI Number 65-1092340		Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 941 FOURTH STREET #200 MIAMI BEACH, FL 33139		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 date if applicable (NOTE: Registered Agent's signature required when submitting)			
FILE NOW! FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY May 15, 2003			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
MGR MATHIESON, DOUGLAS G 1210 GEORGE BUSH BLVD. DELRAY BEACH, FL 33483		NEW ADDRESS. 7601 N. Federal Hwy Boca Raton FL 33487	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		MGR ALAN DAWES P.O. Box 1797 DELRAY BEACH FL 33447	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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: 		Date: April 16, 2003 561-330-0551	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	

30062903



☐ CHECK HERE IF MAKING CHANGES

CR2003 (10/02)