

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007336

FILED
Apr 24, 2009
Secretary of State

Entity Name: PINELAND DEVELOPMENT, LLC

Current Principal Place of Business:

255 MAGNOLIA AVE., SOUTHWEST
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2295
WINTER HAVEN, FL 338832295

New Mailing Address:

FEI Number: 59-3730316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, MARK G ESQ.
255 MAGNOLIA AVE.
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

TURNER, MARK G ESQ.
255 MAGNOLIA AVE, SOUTHWEST.
WINTER HAVEN, FL 33880 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:

04/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TURNER INVESTMENTS, LTD.
Address: P.O. BOX 2295
City-St-Zip: WINTER HAVEN, FL 338832295

Title: MGRM () Delete
Name: DARDEN, DOUGLAS
Address: 6781 WINTERSET GARDENS ROAD
City-St-Zip: WINTER HAVEN, FL 33884

Title: MGRM () Delete
Name: BAKER, CECIL
Address: P.O. BOX 536
City-St-Zip: LAKE ALFRED, FL 33850

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARK G. TURNER

P

04/24/2009

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