2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000010989

1. Entity Name

PARKLAND ONE, LLC

Principal Place of Business

1700 S. MACDILL AVE

STE 340 TAMPA, FL 33629 Mailing Address

1700 S. MACDILL AVE

STE 340

TAMPA, FL 33629

FILED Apr 19, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3729997

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HENDEE, BRETT ESQ. 1700 SOUTH MACDILL AVENUE SUITE 200 TAMPA, FL 33629-5218

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of chang the obligations of registered agent.	ing its registered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered egent and title if applicable.	(NOTE: Registered Agent signature required when reinstalling)	DATE

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARTHUR, BRETTA B 1700 S. MACDILL AVE STE 340 TAMPA, FL 33629	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		000000719207 05/01/07-80012-022 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Butta Bathur

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

4/11/07

813)258-1748

Date

Daylime Phone #