2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013329

Entity Name: LAND RESOURCES, LLC

720 N. INDIANA AVE

ENGLEWOOD, FL 34223

Address:

City-St-Zip:

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 720 N. INDIANA AVE ENGLEWOOD, FL 34223 **Current Mailing Address: New Mailing Address:** 720 N. INDIANA AVE ENGLEWOOD, FL 34223 FEI Number: 65-1128414 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: PAOLILLO, MARK 720 N. INDIANA AVE ENGLEWOOD, FL 34223 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PAOLILLO, MARK Name: Name: Address: 720 N. INDIANA AVE Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DESJARDINS, DALE Name: Name: Address: 720 N. INDIANA AVE Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BEACH, TIM Name: Name: 720 N. INDIANA AVE Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: REYNOLDS, PAUL Name: Address: 720 N. INDIANA AVE Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition FELIX, MICHAEL Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MARK PAOLILLO MGR 05/01/2009