

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90035 049 ****50.00

DOCUMENT # L01000015545

1. Entity Name

HALLAM PRESERVE, LLC



Principal Place of Business

Mailing Address

124 SOUTH FLORIDA AVENUE
LAKELAND FL 33801

~~PO BOX 1746~~
~~LAKELAND FL 33802-1746~~



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

PO BOX 8229

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
LAKELAND, FL

4. FEI Number

59-3745091

Applied For

Not Applicable

Zip

Country

Zip
33802

Country
USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

1st MOORE

CR2E083 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PHILPOT, BRIAN G
124 SOUTH FLORIDA AVENUE
LAKELAND FL 33801

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]

Brian G. Philpot

4/16/07

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2007

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
LAND ONE PROPERTIES, INC
124 S. FLORIDA AVE.
LAKELAND FL 33801 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
HARPER, ROBERT F IV
5900 IMPERIAL LAKES BLVD,
MULBERRY FL 33864 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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CITY - ST - ZIP
☐ Change ☐ Addition

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

SIGNATURE:

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

[Signature] *Brian G. Philpot* *Mgr Land One Properties, Inc.*

Date

Daytime Phone #

4/16/07 *8636079500*