

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019487

FILED
Apr 29, 2009
Secretary of State

Entity Name: LANDMARK REAL ESTATE, LLC

Current Principal Place of Business:

11 RACETRACK RD
STE C3
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

819 PINEDALE ROAD
FORT WALTON BEACH, FL 32547 US

Current Mailing Address:

817 PINEDALE ROAD
FORT WALTON BEACH, FL 32547

New Mailing Address:

819 PINEDALE ROAD
FORT WALTON BEACH, FL 32547 US

FEI Number: 59-3757272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, LOWELL C JR.
819 PINEDALE ROAD
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: LARSON, LOWELL C JR.
Address: 819 PINEDALE ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGR (X) Delete
Name: CARNATHAN, CLAY M
Address: 819 PINEDALE RD.
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SOUTHERN VENTURES OF OKALOOSA COUNTY, INC.
Address: 819 PINEDALE ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547 US

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: BRENDA HENDERSON

VPS

04/29/2009

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