## 2005 LIMITED LIABILITY COMPANY

STREET ADDRESS

CTTY-ST-ZIP

TIFLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE NWE STREET ADDRESS CRY-ST-ZIP TITLE NAME

## **FILED** ANNUAL REPORT Apr 27, 2005 08:00 AM Secretary of State DOCUMENT # L02000002165 1. Entity Name MARSH LANDING-ACS, LLC Principal Place of Business Mailing Address 6803 OLD KINGS ROAD SOUTH 6803 OLD KINGS ROAD SOUTH JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32217 03302005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 03-0384624 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SKINNER, A.C. JR. DO NOT WRITE 6803 OLD KINGS ROAD SOUTH JACKSONVILLE, FL 32217 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstaling) DATE Signature, typed or printed name of registered agent and title if applicable. Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. me MGRM SKINNER, A.C. JR. NAME 6803 OLD KINGS RD., SOUTH STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32217 TITLE U00000336778 04/27/05-80140-003 **50.**00 NAME STREET ADDRESS CITY-ST-ZIP MLE NAME

STREET ADDRESS CMY-ST-ZIP 11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information inclicated on this report is true and accurate and that my signature shall have the same legal effect as it 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.

DO NOT WRITE

IN THIS SPACE