2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000007736

1. Entity Name

EDP LAND COMPANY, LLC



Principal Place of Business

234 OFFICE PLAZA DRIVE TALLAHASSEE, FL 32301

Mailing Address

234 OFFICE PLAZA DRIVE TALLAHASSEE, FL 32301

04282008No Chg-LLC

CR2E083 (12/07)

FILED

Apr 30, 2008 08:00 AM Secretary of State

4. FEI Number Applied For NOT APPLICABLE Not Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Regulred

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PERKINS, EVERALL D 234 OFFICE PLAZA DRIVE TALLAHASSEE, FL 32301 DO NOT WRITE 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000937435 05/27/08-80050-001 143.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	PERKINS, EVERALL D	
STREET ADDRESS	234 OFFICE PLAZA DRIVE	
CITY-ST-ZIP	TALLAHASSEE, FL 32301	
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NAME		
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11. I hereby certify that the information supplied with this filing 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GOOD P.C.

4/28/05

850-678-3131

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

Date

Daytime Phone (