2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L02000029463

1. Entity Name
FIVE LAND GROUP, LLC

Principal Place of Business	Mailing Address
33202 FAIRWAY ROAD LEESBURG, FL 34788	33202 FAIRWAY ROAD LEESBURG, FL 34788

DO NOT WRITE IN THIS SPACE

02262004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
13-4220662	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CHRISTENSEN, GERALD K
33202 FAIRWAY ROAD
LEESBURG, FL 34788

**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

**Filing Fee is $50 00
Due by May 1, 2004**

U00000119523
04/19/04--80104--007 50.00

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	FOX, JAMES S	
STREET ADDRESS	702 EAST MICHIGAN STREET	
CITY-ST-ZIP	MOUNT PLEASANT, MI 48858	
TITLE		
NAME		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *James S Fox*   James S. Fox   April 14, 2004   989-773-3460

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #