

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007212

FILED  
May 18, 2009  
Secretary of State

**Entity Name:** TREASURE COAST LAND ACQUISITIONS, LLC

**Current Principal Place of Business:**

2311 S. 35TH STREET  
FT. PIERCE, FL 34981 US

**New Principal Place of Business:**

**Current Mailing Address:**

192 NW CENTRAL PARK PLAZA  
PORT ST. LUCIE, FL 34986 US

**New Mailing Address:**

**FEI Number:** 20-0992353

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DISQUE & SCHWAB, P.A.  
192 NW CENTRAL PARK PLAZA  
PORT ST. LUCIE, FL 34986 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: P ( ) Delete  
Name: VAN DUZER, SCOTT  
Address: 2311 S 35TH STREET  
City-St-Zip: FORT PIERCE, FL 34981

Title: VP ( ) Delete  
Name: SCHWAB, CHARLES A  
Address: P.O. BOX 880295  
City-St-Zip: PORT SAINT LUCIE, FL 34988

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** CHARLES SCHWAB

VP

05/18/2009

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