2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 06, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000010225

1. Entity Name
YACHT CENTER LAND COMPANY, L.L.C.

Principal Place of Business	Mailing Address
1258 NORTH PALM AVENUE SARASOTA, FL 34236	1258 NORTH PALM AVENUE SARASOTA, FL 34236

05162005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
71-0940547
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HANAN, BENJAMIN R
240 S. PINEAPPLE AVENUE 10TH FLOOR
SARASOTA, FL 34236

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 7, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	GITHLER, CHARLES E III
STREET ADDRESS	1258 N. PALM AVE
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	MGRM
NAME	GITHLER, KIM K
STREET ADDRESS	1258 N. PALM AVE
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	MGRM
NAME	KANE, STANLEY
STREET ADDRESS	539 NORSOTA WAY
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	MGRM
NAME	KANE, DANIEL
STREET ADDRESS	614 S. OWL DRIVE
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000369027
06/06/05-80002-024 50.00

DO NOT WRITE IN THIS SPACE

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