

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000010225

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



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

Mailing Address
**1258 NORTH PALM AVENUE
SARASOTA, FL 34236**



01112007No Chg-LLC

CR2E083 (11/05)

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 _____

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, 2007**

000000585350
01-23-07-80035-008-50.00

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	

**DO NOT WRITE
IN THIS SPACE**

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: _____

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

CHARLES GITHLER

Date

1/15/07

Daytime Phone #

941 9550323