2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011717

Entity Name: STOKES, BRAREN & HOLZ LAND COMPANY, LLC

FILED Apr 19, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
4315 PABL	LO OAKS COU VILLE, FL 322	IRT, SUITE 1				
Current Mailing Address:				New Mailing Address:		
	O OAKS COU VILLE, FL 322					
FEI Number:	75-3118251	FEI Number Applied For()	FEI Nur	mber Not App	plicable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:		Name and	d Address of New Registered Agent:	
4315 PABL	MICHAEL E LO OAKS COU VILLE, FL 322					
	named entity s e of Florida.	submits this statement for the p	ourpose c	of changing i	its registered office or registered agent, or both	
SIGNATUR	RE:					
Electronic Signature of Registered Agent			ent		Date	
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	STOKES & BRA 4315 PABLO O	Delete AREN PROP, ERTIES, LLC AKS COURT, SUITE 1 E, FL 322249667		Title: Name: Address: City-St-Zip:	PRES (X) Change () Addition HOLZ, F. LOGAN 4315 PABLO OAKS COURT, SUITE 1 JACKSONVILLE, FL 322249667 US	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	EVP () Change (X) Addition BRAREN, MICHAEL E 4315 PABLO OAKS COURT JACKSONVILLE, FL 32224 US	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP () Change (X) Addition KUNKEL, JOHN C 4315 PABLO OAKS COURT JACKSONVILLE, FL 32224 US	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VPSE () Change (X) Addition HOLM, MALLORY G 4315 PABLO OAKS COURT JACKSONVILLE, FL 32224 US	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VPTR () Change (X) Addition FREDENHAGEN, SHARON W 4315 PABLO OAKS COURT JACKSONVILLE, FL 32224 US	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	AS () Change (X) Addition LAWARRE, JOY L 4315 PABLO OAKS COURT JACKSONVILLE, FL 32224 US	

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN C. KUNKEL VP 04/19/2007