

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020617

FILED
Jan 17, 2006
Secretary of State

Entity Name: CARLTON LAND HOLDINGS, LLC

Current Principal Place of Business:

8841 WEST TERRY ST
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2491
BONITA SPRINGS, FL 334133 US

New Mailing Address:

FEI Number: 32-0115175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RISTIC, RANDY D
9112 BRENDAN PRESERVE CT.
BONITA SPRINGS, FL 34133 US

Name and Address of New Registered Agent:

RISTIC, RANDY D
12021 BRAMBLE COVE DR
FORT MYERS, FL 33905 US

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: RANDY RISTIC 01/17/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WEBB, KEVIN M
Address: 9112 BRENDAN PRESERVE CT.
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: MGRM () Delete
Name: RISTIC, RANDY D
Address: 23560 WALDEN CENTER DR. #110
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WEBB, KEVIN M
Address: 12201 HAMMOCK CREEK WAY
City-St-Zip: FORT MYERS, FL 33905 US

Title: MGRM (X) Change () Addition
Name: RISTIC, RANDY D
Address: 12021 BRAMBLE COVE DR
City-St-Zip: FORT MYERS, FL 33905

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: RANDY RISTIC MGRM 01/17/2006

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