2005 LIMITED LIABILITY COMPANY.

FILED Mar 12, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # L03000035587 LAND VISION HOLDINGS, LLC Mailing Address Principal Place of Business 575 2ND AVENUE SOUTH 575 2ND AVENUE SOUTH ST. PETERSBURG, FL 33701 ST. PETERSBURG, FL 33701 02072005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0207958 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANDERSON, STEPHENSON DO NOT WRITE 575 2ND AVENUE SOUTH ST. PETERSBURG, FL 33701 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. DATE (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE ANDERSON, STEPHENSON NAME STREET ADDRESS 575 2ND AVENUE SOUTH ST. PETERSBURG, FL 33701 CITY-ST-ZIP TITLE 000000261902 NAME 03/14/05-80031-005 50.00 STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this thing 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 trusted 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 REPRI

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP