

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011234

Entity Name: LANARK LANE, LLC

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

3955 JOHNS CREEK COURT
SUWANEE, GA 30024

New Principal Place of Business:

Current Mailing Address:

C/O MERRITT & TENNEY, LLP
200 GALLERIA PARKWAY, SUITE 500
ATLANTA, GA 30339

New Mailing Address:

FEI Number: 20-0718756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OLIVER, LEWIS B
Address: 1220 SUTTON MILL
City-St-Zip: CAIRO, GA 39828 US

Title: MGRM () Delete
Name: RODDENBERRY, CHARLES S
Address: 2426 GEORGIA HIGHWAY 111 S.
City-St-Zip: CAIRO, GA 39828 US

Title: MGRM () Delete
Name: WLC INVESTMENTS LLC,
Address: 719 AND 721 OCEAN CLUB PLACE
City-St-Zip: AMELIA ISLAND, FL 32034 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LEWIS B. OLIVER

MGRM

04/18/2006

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