

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000025791**

1. Entity Name  
**EASTLAND COMPANY, LLC**



Principal Place of Business

**C/O J. THOMAS DODSON  
13361 ATLANTIC BOULEVARD  
JACKSONVILLE, FL 32225**

Mailing Address

**C/O GREGORY D. MORRIS  
2325 ULMERTON RD, SUITE 20  
CLEARWATER, FL 33762**



04172007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**02-0719771**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**MORRIS, GREGORY D  
2325 ULMERTON RD, STE 20  
CLEARWATER, FL 33762**

**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**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
MORRIS, GREGORY D  
2325 ULMERTON RD, STE 20  
CLEARWATER, FL 33762**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
DODSON, J. THOMAS  
13361 ATLANTIC BLVD  
JACKSONVILLE, FL 32225**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
LANCASTER, ARTHUR E  
13361 ATLANTIC BLVD  
JACKSONVILLE, FL 32225**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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05/15/07-80118-017 50.00

**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:**

**Gregory D. Morris**

**4/27/07**

**727-576-6444**

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

Date

Daytime Phone #