

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000042269

FILED
Feb 18, 2009
Secretary of State

Entity Name: PROFESSION LANDING, LLC

Current Principal Place of Business:

34 FLOWERWOOD DRIVE
CHATTAHOOCHEE, FL 32324 US

New Principal Place of Business:

127 SALEM COURT
TALLAHASSEE, FL 32301 US

Current Mailing Address:

34 FLOWERWOOD DRIVE
CHATTAHOOCHEE, FL 32324 US

New Mailing Address:

127 SALEM COURT
TALLAHASSEE, FL 32301 US

FEI Number: 20-1248682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANOCHA, ASHOK
34 FLOWERWOOD DRIVE
CHATTAHOOCHEE, FL US US

Name and Address of New Registered Agent:

MANOCHA, ASHOK
7990 LOCHKNOLL LANE
TALLAHASSEE, FL 32312 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:

02/18/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ASHOK, MANOCHA
Address: 34 FLOWERWOOD DRIVE
City-St-Zip: CHATTAHOOCHEE, FL 32324

Title: MGRM () Delete
Name: JAMES, MCSOLEY
Address: 2412 OXFORD ROAD
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ASHOK, MANOCHA
Address: 7990 LOCHKNOLL LANE
City-St-Zip: TALLAHASSEE, FL 32312

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

I hereby certify that the information supplied with this filing does not qualify 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: ASHOK MANOCHA

MGRM

02/18/2009

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