## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Apr 22, 2008 08:00 AN Secretary of State **DOCUMENT # L04000046776** LAND OR SEA, LLC Principal Place of Business Mailing Address 5186 EARLY TERRACE 5186 EARLY TERRACE PORT CHARLOTTE, FL 33981 PORT CHARLOTTE, FL 33981 04162008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1343787 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RUECKEL, KEITH E SR. DO NOT WRITE **5186 EARLY TERRACE** PORT CHARLOTTE, FL 33981 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, typed or printed name of registered agent and title it applicable (NOTE: Registered Agen) signature required when reinstating) U00000914200 FILE NOW!!! FEE IS \$138.75 05/08/08-80047-009 138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS **MGRM** TITLE RUECKEL, KEITH E SR 5186 EARLY TERRACE STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33981 TITLE RUECKEL, KEITH E JR NAME STREET ADDRESS **721 NE 56 COURT** CITY-ST-ZIP FT LAUDERDALE, FL 33334 TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes 1 further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it 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

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

SIGNATURE AND TYPED OR PRINTED NAME OF