

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000047028

Entity Name: FLP LAND SERVICES, LLC

FILED
Sep 07, 2006
Secretary of State

Current Principal Place of Business:

7208 SAND LAKE ROAD, SUITE 304
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

7208 SAND LAKE ROAD, SUITE 304
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 51-0514443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWITZER, JEFFREY A
7208 SAND LAKE RD, SUITE 304
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

CANTU, LOUIS M
4508 SAILBREEZE CT.
ORLANDO, FL 32810 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: REBECCA S. MATZ, ASST. SECRETARY

09/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SWITZER, JEFFREY A
Address: 7208 SAND LAKE RD, SUITE 304
City-St-Zip: ORLANDO, FL 32819 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SWITZER, TRESA M
Address: 7208 SAND LAKE RD, SUITE 304
City-St-Zip: ORLANDO, FL 32819 US

Title: MGRM () Change (X) Addition
Name: FLORIDA LAND PARTNER, S, LLC
Address: 7208 SAND LAKE RD, SUITE 304
City-St-Zip: ORLANDO, FL 32819 US

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: TRESA M. SWITZER

MGR

09/07/2006

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