2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050150

Entity Name: PORT MAYACA LAND LLC

FILED Feb 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

500 AUSTRALIAN AVE S SUITE 710 WEST PALM BEACH, FL 33401

New Mailing Address: Current Mailing Address:

500 AUSTRALIAN AVE S SUITE 710 WEST PALM BEACH, FL 33401

FEI Number: 20-1330373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KAHLERT, HERBERT F 500 AUSTRALIAN AVE S SUITE 710

MANAGING MEMBERS/MANAGERS:

WEST PALM BEACH, FL 33401 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:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition

BOOSE, III, WILLIAM R BOOSE, III, WILLIAM R Name: Name: Address: 4152 WEST BLUE HERON BLVD STE #107

631 US HIGHWAY ONE, STE 305 Address:

City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: RIVIERA BEACH, FL 33404

Title: MGR () Delete Title: () Change () Addition

Name: KAHLERT, HERBERT F Name: Address: 500 AUSTRALIAN AVE S STE 710 Address: City-St-Zip: WEST PALM BEACH, FL 33401 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: HERBERT F KAHLERT 02/23/2009