2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000052551

1. Entity Name
OKEECHOBEE LAND COMPANY, LLC



FILED Apr 25, 2008 08:00 AN Secretary of State

Principal Place of Business 5092 LEEWARD WAY

ORLANDO, FL 32809

Mailing Address

5092 LEEWARD WAY ORLANDO, FL 32809



03192008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 51-0515390

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JOINER, MOSE B 208 NORTH PARROTT AVENUE OKEECHOBEE, FL 34972

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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

FILE NOW!II FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JOINER, MOSE 208 NORTH PARROTT AVENUE OKEECHOBEE, FL 34972
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WILLIAMS, CHRISTINE D 208 NORTH PARROTT AVENUE OKEECHOBEE, FL 34972
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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

SIGNATURE AND TYPED OR PRINTED A

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FOF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/23/08

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Daytime P