

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000074537

**Entity Name:** EASTPOINT LANDS, L.L.C.

**FILED**  
**Aug 25, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

183 NORTH BAYSHORE DRIVE  
EASTPOINT, FL 32328

**New Principal Place of Business:**

**Current Mailing Address:**

183 NORTH BAYSHORE DRIVE  
EASTPOINT, FL 32328

**New Mailing Address:**

**FEI Number:** 27-3317424

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILLENDER, BRUCE  
183 NORTH BAYSHORE DRIVE  
EASTPOINT, FL 32328 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MM  
Name: MILLENDER, BRUCE  
Address: 183 NORTH BAYSHORE DR  
City-St-Zip: EASTPOINT, FL 32328

Title: MM  
Name: MILLENDER, ANGELINE  
Address: 183 NORTH BAYSHORE DR.  
City-St-Zip: EASTPOINT, FL 32328

I hereby 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: BRUCE MILLENDER

MGRM

08/25/2010

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