

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000082895

FILED
Apr 01, 2005
Secretary of State

Entity Name: WILLIAMS LAND MANAGEMENT, LLC

Current Principal Place of Business:

1242 CUNNINGHAM CREEK DRIVE
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

1242 CUNNINGHAM CREEK DRIVE
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 20-1917086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTREPID REGISTERED AGENT SERVICES, LLC
225 WATER STREET, SUITE 2020
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

INTREPID REGISTERED AGENT SERVICES, LLC
ONE INDEPENDENT DRIVE
1200
JACKSONVILLE, FL 32202 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: GWEN HUTCHESON GRIGGS, EVP

04/01/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

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

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: WILLIAMS, ROBERT
Address: 1242 CUNNINGHAM CREEK DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGR () Change (X) Addition
Name: WILLIAMS, RACHEL A
Address: 1242 CUNNINGHAM CREEK DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT WILLIAMS

MGR

04/01/2005

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