

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086112

FILED
Aug 27, 2007
Secretary of State

Entity Name: FLORIDA LAND CLEARING AND DEVELOPMENT, L.L.C.

Current Principal Place of Business:

390 NE CASTAGNA LANE
MAYO, FL 32066

New Principal Place of Business:

Current Mailing Address:

PO BOX 356
MAYO, FL 32066

New Mailing Address:

160 NE CASTAGNA LANE
MAYO, FL 32066

FEI Number: 84-1656745 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

OWENS, JOSEPH M
160 NE CASTAGNA LANE
MAYO, FL 32066 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: MGRM () Delete
Name: SAX, HOLGER
Address: PO BOX 20
City-St-Zip: D-78532 TUTTLINGEN GERMANY,

Title: MGRM () Delete
Name: OWENS, JOSEPH M
Address: 390 NE CASTAGNA LANE
City-St-Zip: MAYO, FL 32066

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: OWENS, JOSEPH M
Address: 160 NE CASTAGNA LANE
City-St-Zip: MAYO, FL 32066

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: MARK OWENS

PRES

08/27/2007

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