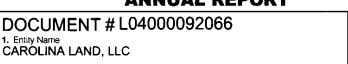
2008 LIMITED LIABILITY COMPANY

ANNUAL REPORT



limited liability company or the receive

JRB. WWW. AUTO SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE



FILED

Feb 25, 2008 8:00 am Secretary of State

Daytime Phone #

CARÓLINA LAND, LLC 60010219 Principal Place of Business Mailing Address C/O FLORIDA MANAGEMENT COMPANY 1555 PALM BEACH LAKES BLVD STE 1100 P.O. BOX 3267 WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33402 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02082008 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For 51-0533863 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ECCLESTONE, E. LLWYD Street Address (P.O. Box Number is Not Acceptable) 1555 PALM BEACH LAKES BLVD STE 1100: WEST PALM BEACH, FL 33401 City Zip Code 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 THE METERS Make check payable to FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Florida Department of State MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE ☐ Delete TITLE ☐ Change ■ Addition ECCLESTONE, E. LLWYD NAME NAME 1555 PALM BEACH LAKES BLVD #1100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33401 CITY-ST-ZIP TITLE **VPT** Delete TITLE ☐ Change Addition COOPER, RON NAME NAME HELENA LEYENDECKER 1555 PALM BEACH LAKES BLVD #1100 STREET ADDRESS STREET ADDRESS 1555 PALM BEACH LAKES BLVD, # 1100 CITY-ST-ZIP WEST PALM BEACH, FL 33401 CITY-ST-ZIP WEST PALM BEACH, FL 33401 Change TITLE Delete TITLE ☐ Addition NAME GAMMON, NANNETTE NAME NANNETTE GAMMON 1555 PALM BEACH LAKES BLVD #1100 STREET ADORESS STREET ADDRESS 1555 PALM BEACH LAKES BLVD, # 1100 WEST PALM BEACH, FL 33401 CITY-ST-ZIP CITY-ST-ZIE WEST PALM BEACH, FL 33401 ☐ Delete ☐ Change TITLE TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS C/TY-ST-ZIP CITY-ST-ZIP 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 indicates 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 or trustee empowered to execute this report as required by Chapte