


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 24, 2007 8:00 am
Secretary of State

04-02-2007 90442 037 ****55.00

DOCUMENT # L05000013031 1. Entity Name TOLEDO BLADE PEACHLAND, LLC	
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Principal Place of Business 2008 RIVERSIDE AVENUE SUITE 300 JACKSONVILLE, FL 32204	Mailing Address 2008 RIVERSIDE AVENUE SUITE 300 JACKSONVILLE, FL 32204
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03052007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2387708	Applied For
	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

DALE, HOWARD L
200 WEST FORSYTH STREET, SUITE 1100
JACKSONVILLE, FL 32202-4308

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IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ATLANTIC COAST DEVELOPERS, LLC 2008 RIVERSIDE AVENUE SUITE 300 JACKSONVILLE, FL 32204
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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: Karen S. Nicholas Date: 3-19-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #