

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000020804

Entity Name: LANDMARQ PROPERTIES, LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

7054 MADRID AVENUE
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

7054 MADRID AVENUE
JACKSONVILLE, FL 32217 US

New Mailing Address:

FEI Number: 57-1218553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIZEMORE, MARK
7054 MADRID AVE
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

SIZEMORE, MARK F
7054 MADRID AVE
JACKSONVILLE, FL 32217 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: MARK F SIZEMORE

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SIZEMORE, MARK
Address: 7054 MADRID AVENUE
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: MGRM () Delete
Name: SIZEMORE, JOYCE
Address: PO BOX 550581
City-St-Zip: JACKSONVILLE, FL 322550581 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SIZEMORE, MARK F
Address: 7054 MADRID AVENUE
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: MGRM (X) Change () Addition
Name: SIZEMORE, JOYCE L
Address: PO BOX 550581
City-St-Zip: JACKSONVILLE, FL 322550581 US

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 F SIZEMORE

MGMR

04/29/2008

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