

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031460

FILED  
Apr 24, 2008  
Secretary of State

**Entity Name:** HARLAND LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

P. O. BOX 10399  
NAPLES, FL 34101

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 10399  
NAPLES, FL 34101

**New Mailing Address:**

**FEI Number:** 20-2590891

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BABIONE, MARCI CPA  
4060 EDGEWATER DRIVE  
ORLANDO, FL 32804 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: MGR ( ) Delete  
Name: HARRIS, JULIA K  
Address: 3662 HALDEMAN CREEK  
City-St-Zip: NAPLES, FL 34112

Title: MGRM ( ) Delete  
Name: LANDAU, ALAN  
Address: 151 RANDOM ROAD  
City-St-Zip: FAIRFIELD, CT 06825

**ADDITIONS/CHANGES:**

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

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

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: JULIA K HARRIS

MGR

04/24/2008

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