

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jun 16, 2008 8:00 am**  
**Secretary of State**

06-16-2008 90145 025 \*\*\*538.75

**DOCUMENT # L05000040515**

1. Entity Name  
**THE DUBLIN LAND COMPANY, LLC**



Principal Place of Business  
**2051 E. F. GRIFFIN ROAD  
BARTOW, FL 33830**

Mailing Address  
**P.O. BOX 1359  
BARTOW, FL 33831**

**50007102**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

**P.O. Box 423**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06112008 Chg-LLC CR2E083 (12/06)

City & State

City & State  
**BARTOW, FL**

4. FEI Number  
**20-2824332**

Applied For  
Not Applicable

Zip

Country

Zip  
**33831**

Country  
**USA**

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PARKER, SEAN R ESQ.  
120 NORTH CENTRAL AVE  
BARTOW, FL 33830**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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

**FILE NOW!!! FEE IS \$538.75  
Due by September 12, 2008**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
PARKER, KELLY M  
2051 E. F. GRIFFIN ROAD  
BARTOW, FL 33830** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**1830 WARDLAW DR  
BARTOW, FL 33830** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
PARKER, SEAN R  
2051 E. F. GRIFFIN ROAD  
BARTOW, FL 33830** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**1830 WARDLAW DR  
BARTOW, FL 33830** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
MURPHY, JANE K  
2051 E.F. GRIFFIN ROAD  
BARTOW, FL 33830** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
MURPHY, TIMOTHY I  
2051 E.F. GRIFFIN ROAD  
BARTOW, FL 33830** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**6/13/08**

Date

**863-733-9111**

Daytime Phone #