


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 15, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000043831 1. Entity Name INLAND INVESTMENT PROPERTIES, LLC	
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Principal Place of Business 6550 53RD ST PINELLAS PARK, FL 33781	Mailing Address 6550 53RD ST PINELLAS PARK, FL 33781
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DO NOT WRITE IN THIS SPACE

01292008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-2770453	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 HINES, JAMES P 315 S. HYDE PARK AVENUE TAMPA, FL 33606	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000829020
02/26/08-80017-017 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SARTOR, SR, JOHN R 18441 HARDROCK RD BROOKSVILLE, FL 34603
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARLSON, CARL 23112 FITZHUGH AVE BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOCCALINO, GEORGE 5582 BAYVIEW DR SEMINOLE, FL 33772
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCVEY, JOHN W 205 66TH STREET S. SAINT PETERSBURG, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:  **George Toccalino/MGRM**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #