

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 06, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000045153**

1. Entity Name  
**LANDMARK VALUATION GROUP, LLC**



Principal Place of Business  
**1310 EAST ROBINSON STREET  
ORLANDO, FL 32801**

Mailing Address  
**1310 EAST ROBINSON STREET  
ORLANDO, FL 32801**



02042008 No Chg-LLC CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>34-2046055</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**CHURCH, LARRY A  
1310 EAST ROBINSON STREET  
ORLANDO, FL 32801**

**DO NOT WRITE  
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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	CHURCH, LARRY A
STREET ADDRESS	1310 EAST ROBINSON STREET
CITY-ST-ZIP	ORLANDO, FL 32801

TITLE	MGRM
NAME	DABBY, MICHAEL D
STREET ADDRESS	1310 EAST ROBINSON STREET
CITY-ST-ZIP	ORLANDO, FL 32801

TITLE	MGRM
NAME	BENNETT, WILLIAM F
STREET ADDRESS	1310 EAST ROBINSON STREET
CITY-ST-ZIP	ORLANDO, FL 32801

TITLE	MGRM
NAME	HOLTON, TINA C
STREET ADDRESS	1310 EAST ROBINSON STREET
CITY-ST-ZIP	ORLANDO, FL 32801

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000816387  
02/14/08-80076-001 138.75

**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:** \_\_\_\_\_

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

Date

Daytime Phone #