

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069706

Entity Name: LANDVIC, LLC

FILED
Aug 11, 2006
Secretary of State

Current Principal Place of Business:

5537 MOBILE STREET
SUITE 101
ST. AUGUSTINE, FL 32092

New Principal Place of Business:

5537 MOBILE STREET
ST. AUGUSTINE, FL 32092

Current Mailing Address:

5537 MOBILE STREET
SUITE 101
ST. AUGUSTINE, FL 32092

New Mailing Address:

5537 MOBILE STREET
ST. AUGUSTINE, FL 32092

FEI Number: 55-0912495 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SMITH, ANNETTE L
5537 MOBILE STREET
SUITE 101
ST. AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

SMITH, ANNETTE L
5537 MOBILE STREET
ST. AUGUSTINE, FL 32092 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: ANNETTE SMITH

08/11/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SMITH, VICTOR C JR.
Address: 5537 MOBILE STREET
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGR () Delete
Name: SMITH, MICHAEL G
Address: 5537 MOBILE STREET
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGR () Delete
Name: SMITH, ANNETTE L
Address: 5537 MOBILE STREET
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES:

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

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 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: ANNETTE SMITH

MGR

08/11/2006

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