

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000076063

FILED
Jul 29, 2009
Secretary of State**Entity Name:** TANGERINE LAND COMPANY, LLC**Current Principal Place of Business:**5270 DORA DR.
TANGERINE, FL 32777**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 705
TANGERINE, FL 32777**New Mailing Address:****FEI Number:** 01-0841143**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DONOFIRO, KENNEDY M
1607 HILLTOP DR.
MT. DORA, FL 32757 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:** MGRM () Delete
Name: MAIRS, MARJORIE M
Address: P.O. BOX 705
City-St-Zip: TANGERINE, FL 32777**Title:** MGRM (X) Delete
Name: DONOFRIO, KENNEDY M
Address: 1607 HILLTOP DR.
City-St-Zip: MT DORA, FL 32757**ADDITIONS/CHANGES:****Title:** MGR (X) Change () Addition
Name: COFFEY, JIMMIE F
Address: 812 ARLINGTON BLVD
City-St-Zip: ALTAMONTE SPRINGS, FL 32701**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: JIMMIE F. COFFEY

MGR

07/29/2009

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