## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2007 08:00 AM
Secretary of State

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1. Entity Name

LANDON VENTURES IV, L.L.C.



6.5

Principal Place of Business

Mailing Address

255 ALHAMBRA CIRCLE, SUITE 820 CORAL GABLES, FL 33134

255 ALHAMBRA CIRCLE, SUITE 820 CORAL GABLES, FL 33134



DO NOT WRITE IN THIS SPACE

01092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3859672

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

MORGAN, CHARLES O JR 1300 NORTHWEST 167TH STREET, SUITE 3 MIAMI, FL 33169

## DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the the obligations of registered agent.</li></ol>	e State of Florida. I am familiar with, and accept
SIGNATURE	

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007 000000589857 01/18/07-80033-019 55.00

9.	MANAGING MEMBERS/MANAGERS
	MGR
TITLE NAME	LANDON, R. KIRK
STREET ADDRESS	
CITY-ST-ZIP	255 ALHAMBRA CIRCLE, SUITE 820
	CORAL GABLES, FL 33134
TITLE	
NAME	
STREET ADORESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TOLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	

## DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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

1/11/07

305/442-1118

Daytime Phone #