


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L05000106267 1. Entity Name HUDSON LAND CO-OP LLC	
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Principal Place of Business 18 PRIVATE DRIVE CRAWFORDVILLE, FL 32327-0949	Mailing Address 18 PRIVATE DRIVE CRAWFORDVILLE, FL 32327-0949
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DO NOT WRITE IN THIS SPACE



01052007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3798402	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

HUDSON, MARK H
11 CALVARY COURT
CRAWFORDVILLE, FL 32327-0967

**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

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUDSON, BERT W 18 PRIVATE DRIVE CRAWFORDVILLE, FL 323270949
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUDSON, MARK H 11 CALVARY COURT CRAWFORDVILLE, FL 323270967
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUDSON, MICHAEL C 25204 OAKS BLVD. LAND O' LAKES, FL 346395552
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/09/07-80033-013 50.00

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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: *Mark Hudson Secretary* **1/6/07** **926-3366**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #