

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108662

**FILED**  
**Apr 17, 2008**  
**Secretary of State**

**Entity Name:** MCINTOSH TIMBERLAND LLC

**Current Principal Place of Business:**

9995 GATE PARKWAY NORTH, SUITE 400  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

9428 BAYMEADOWS ROAD  
SUITE 230  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

9995 GATE PARKWAY NORTH, SUITE 400  
JACKSONVILLE, FL 32246

**New Mailing Address:**

9428 BAYMEADOWS ROAD  
SUITE 230  
JACKSONVILLE, FL 32256

FEI Number: 20-3773198

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

IBACH, JOHN R  
1301 RIVERPLACE BLVD., SUITE 1500  
JACKSONVILLE, FL 32207 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: ITERA TIMBERLAND & D, EVELOPMENT STR A TEGIES  
Address: 9996 GATE PARKWAY N. SUITE 400  
City-St-Zip: JACKSONVILLE, FL 32246

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: THE ARCHER GROUP,  
Address: 9428 BAYMEADOWS ROAD SUITE 230  
City-St-Zip: JACKSONVILLE, FL 32256

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: TIMOTHY RITCH

MGRM

04/17/2008

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