## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000120819

Entity Name: 4 LANDINFO, LLC

**FILED** Apr 26, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

616 ATLANTIC SHORES BOULEVARD 2267 S UNIVERSITY DRIVE SUITE NO. 205 DAVIE, FL 33324

HALLANDALE, FL 33009

**Current Mailing Address: New Mailing Address:** 

616 ATLANTIC SHORES BOULEVARD 2267 S UNIVERSITY DRIVE SUITE NO. 205 DAVIE, FL 33324 HALLANDALE, FL 33009

FEI Number: 11-3771772 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

THE LAW OFFICES OF RANDALL L. GILBERT, P.A 15700 NW 7TH AVENUE MIAMI, FL 33169

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

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: () Delete (X) Change ( ) Addition

SILVESTER, MICHAEL SILVESTER, MICHAEL Name: Name: Address: 616 ATLANTIC SHORES BOULEVARD, SUITE 205 Address: 2267 S UNIVERSITY DRIVE

City-St-Zip: HALLANDALE, FL 33009 US City-St-Zip: DAVIE, FL 33324 US

Title: MGR () Delete Title: () Change () Addition

Name: CAPUOZZO, TONY Name: Address: 7744 PETERS ROAD, SUITE 167 Address: City-St-Zip: PLANTATION, FL 33324 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.

**PRES** SIGNATURE: MICHAEL SILVESTER 04/26/2007