

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000121022

FILED
Jan 22, 2009
Secretary of State

Entity Name: PC LAND INVESTMENTS, LLC

Current Principal Place of Business:

17320 PANAMA CITY BEACH PARKWAY
SUITE 107
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

17320 PANAMA CITY BEACH PARKWAY
SUITE 107
PANAMA CITY BEACH, FL 32413

New Mailing Address:

FEI Number: 20-3961740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEEBRICK, BRIAN D ESQ.
220 MCKENZIE AVENUE
PANAMA CITY, FL 32401 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: ELAM INVESTMENTS, LL, C
Address: 136 MAIN STREET
City-St-Zip: BIRMINGHAM, AL 35213

Title: MGRM () Delete
Name: SHEFFCO, LLC,
Address: 1431 TROUT DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32411

Title: MGRM () Delete
Name: MCINNIS, STERRETT P
Address: 17320 PC BCH PKWY, SUITE 107
City-St-Zip: PANAMA CITY BEACH, FL 32413

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: S. PROCTER MCINNIS

MGRM

01/22/2009

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