

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 23, 2007 8:00 am**  
**Secretary of State**

02-23-2007 90210 030 \*\*\*\*50.00

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<b>DOCUMENT # L05000121338</b> 1. Entity Name <b>PENSACOLA LAND PARTNERS, LLC</b>					
Principal Place of Business <b>226 SOUTH PALAFOX STREET SUITE 101A PENSACOLA, FL 32502</b>			Mailing Address <b>226 SOUTH PALAFOX STREET SUITE 101A PENSACOLA, FL 32502</b>		
2. Principal Place of Business - No P.O. Box # <b>1101 N. 9th Ave</b> Suite, Apt. #, etc.		3. Mailing Address <b>1101 N. 9th Ave</b> Suite, Apt. #, etc.			
City & State <b>Pensacola, FL</b> Zip <b>32501</b>		City & State <b>Pensacola, FL</b> Zip <b>32501</b>		4. FEI Number <b>51-0562137</b>	
Country <b>USA</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>GRANGER, KENNETH E III 226 SOUTH PALAFOX STREET, SUITE 101-A PENSACOLA, FL 32502</b>				7. Name and Address of New Registered Agent Name <b>Granger, Kenneth E III</b> Street Address (P.O. Box Number is Not Acceptable) <b>1101 N. 9th Ave</b> City <b>Pensacola</b> State <b>FL</b> Zip Code <b>32501</b>	
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 <u><i>Kenneth E. Granger III</i></u> <b>Kenneth E. Granger, III</b> 2/1/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRANGER, KENNETH E III 226 SOUTH PALAFOX STREET, SUITE 101-A PENSACOLA, FL 32502	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>1101 N. 9th Ave. Pensacola, FL 32501</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PARKER, THOMAS PETER 226 SOUTH PALAFOX STREET, SUITE 101-A PENSACOLA, FL 32502	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>1101 N. 9th Ave. Pensacola, FL 32501</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u><i>Kenneth E. Granger III</i></u> <b>Kenneth E. Granger, III</b> 2/1/07 (950) 434-7500 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					