

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00
Secretary of State

DOCUMENT # L05000123520

1. Entity Name
FLORIDA LAND AND CATTLE, LLC



Principal Place of Business
**8920 DARTMOR WAY
FORT MYERS, FL 33908 US**

Mailing Address
**8920 DARTMOR WAY
FORT MYERS, FL 33908 US**



03202008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PATTERSON, MELVIN R
8920 DARTMOR WAY
FORT MYERS, FL 33908**

**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 _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

U000000910846
05/07/08-80016-017 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
W.H.M MARKETING CONSULTANTS, INC
4707 OLANDER DR
MYRTLE BEACH, SC 29577**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
CAPITAL ACCEPTANCE, LLC
8920 DARTMOR WAY
FORT MYERS, FL 33908**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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CITY - ST - ZIP

**DO NOT WRITE
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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/16/08 (239) 482-4461
Date Daytime Phone #