2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000001626

1. Entity Name

HUDSON LAND & DEVELOPMENT, LLC



Principal Place of Business

34650 US HWY 19 N

STE 108 PALM HARBOR, FL 34684 Mailing Address

34650 US HWY 19 N

STE 108 PALM HARBOR, FL 34684 FILED May 08, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

04252008 No Chg-LLC

4. FEI Number Applied For 30-4052809 Not Applicable

5. Certificate of Status Desired Fee Required Fee Required

6. Name and Address of Current Registered Agent

JENKINS, ROSE M 34650 US HWY 19 N SUITE 108 PALM HARBOR, FL 34684

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				
9.	MANAGING MEMBERS/MANAGERS		- 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAMANDO, MICHAEL 603 BAYWOOD DR. S DUNEDIN, FL 346983		U00000350057 06/03/08-80050-022 138.75 DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO		
NAME STREET ADDRESS CITY-ST-ZIP		IN 7	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

11. I hereby certify that the information supplied with this filling 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 peceiver or trustge empowered to execute this report as required by Chapter 608, Florida Statutes.

LAMANDO MICHAEL

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

Daytime Phone