

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000039741

**FILED**  
**Jan 10, 2010**  
**Secretary of State**

**Entity Name:** SANDY LAND COMPANY, LLC

**Current Principal Place of Business:**

483 NORTH BEACH STREET  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

483 NORTH BEACH STREET  
ORMOND BEACH, FL 32174

**New Mailing Address:**

**FEI Number:** 72-1615331

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GLOVER, PETER M  
483 NORTH BEACH STREET  
ORMOND BEACH, FL 32174 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  
**Name:** CIATTO, PASQUALINO F  
**Address:** 134 MILL SPRING PLACE  
**City-St-Zip:** ORMOND BEACH, FL 32174

**Title:** MGRM  
**Name:** FERGUSON, RAYMOND  
**Address:** 1286 JOHN ANDERSON DRIVE  
**City-St-Zip:** ORMOND BEACH,, FL 32174

**Title:** MGRM  
**Name:** GLOVER, PETER M  
**Address:** 483 NORTH BEACH STREET  
**City-St-Zip:** ORMOND BEACHH, FL 32174

I hereby 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:** PETER M. GLOVER

MGRM

01/10/2010

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