

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT




**FILED**  
**Mar 01, 2007 8:00 am**  
**Secretary of State**

03-01-2007 90192 009 \*\*\*\*50.00

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01032007 Chg-LLC CR2E083 (12/06)

DOCUMENT # L06000041582			
1. Entity Name LANDMARK GROUP DEVELOPMENT, LLC			
Principal Place of Business 625 COURT STREET, SUITE 200 CLEARWATER, FL 33756		Mailing Address 625 COURT STREET, SUITE 200 CLEARWATER, FL 33756	
2. Principal Place of Business - No P.O. Box # 220 BELLEVUE BLVD Suite, Apt. #, etc. #411		3. Mailing Address 220 BELLEVUE BLVD Suite, Apt. #, etc. #411	
City & State CLEARWATER, FL		City & State CLEARWATER, FL	
Zip 33756	Country PINELAS	Zip 33756	Country PINELAS
4. FEI Number 20-4878017		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent NASH, THOMAS C II 625 COURT STREET, SUITE 200 CLEARWATER, FL 33756		7. Name and Address of New Registered Agent Name MONTE C. SIMS Street Address (P.O. Box Number is Not Acceptable) 220 BELLEVUE BLVD #411 City CLEARWATER, FL Zip Code 33756	
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 		DATE 1/15/07	
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SIMS, MONTE 625 COURT STREET, SUITE 200 CLEARWATER, FL 33756 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 220 BELLEVUE BLVD #411 CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TITUS, JERI 625 COURT STREET, SUITE 200 CLEARWATER, FL 33756 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 220 BELLEVUE BLVD #411 CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SIMS, CRAIG A 625 COURT STREET, SUITE 200 CLEARWATER, FL 33756 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 220 BELLEVUE BLVD CLEARWATER, FL 33756
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: 		DATE 1/15/07 727-540-1136	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone	