2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043986

Entity Name: CENTRAL LAND, LLC

FILED Apr 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

501 EAST MARY ESTHER CUTOFF 4507 FURLING LANE

SUITE #4 SUITE 114

FORT WALTON BEACH, FL 32548 DESTIN, FL 32541 US

Current Mailing Address: New Mailing Address:

PO BOX 1205 4507 FURLING LANE

SHALIMAR, FL 32579 SUITE 114

DESTIN, FL 32541 US

FEI Number: 56-2583489 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHIREY, JASON P
501 EAST MARY ESTHER CUTOFF
SUITE #4
SUITE #114
SHIREY, JASON P
4507 FURLING LANE
SUITE #114

FORT WALTON BEACH, FL 32548 US DESTIN, FL 32541 US

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: JASON P. SHIREY 04/08/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MARR, THOMAS J
 Name:

 Address:
 225-D ALCONESE AVE SE
 Address:

 City-St-Zip:
 FORT WALTON BEACH, FL 32548
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MARR, GAYLE
 Name:

 Address:
 225-D ALCONESE AVE SE
 Address:

 City-St-Zip:
 FORT WALTON BEACH, FL 32548
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: SHIREY, JASON Name: SHIREY, JASON

Address: 501 E. MARY ESTHER CUTOFF, SUITE #4 Address: 4507 FURLING LANE, SUITE #114

City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: DESTIN, FL 32541 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JASON SHIREY MGR 04/08/2008