

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044902

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: 1460 LAND L.L.C.

**Current Principal Place of Business:**

1460 - 36TH STREET  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

1460 - 36TH STREET  
VERO BEACH, FL 32960

**New Mailing Address:**

FEI Number: 20-8257257

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAYLOR, J. ATWOOD III  
5070 N. HIGHWAY A-1-A, SUITE 200  
VERO BEACH, FL 32963 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: MGR ( ) Delete  
Name: SCOTT, MICHAELA G M.D.  
Address: 1460 - 36TH STREET  
City-St-Zip: VERO BEACH, FL 32960

Title: MGRM ( ) Delete  
Name: WEEKS, FREDERICK M M.D.  
Address: 1460 - 36TH STREET  
City-St-Zip: VERO BEACH, FL 32960

Title: MGRM ( ) Delete  
Name: MCGARRY, WILLIAM T M.D.  
Address: 1460 - 36TH STREET  
City-St-Zip: VERO BEACH, FL 32960

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAELA G SCOTT, MD

MGR

03/16/2009

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