

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000049769

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: LANDER INVESTMENTS, L.L.C.

**Current Principal Place of Business:**

449 CENTRAL AVENUE  
SUITE 104  
ST PETERSBURG, FL 33701 US

**New Principal Place of Business:**

**Current Mailing Address:**

449 CENTRAL AVENUE  
SUITE 104  
ST PETERSBURG, FL 33701 US

**New Mailing Address:**

FEI Number: 26-1469940

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LANDER, TERISUE  
2812 PASS-A-GRILLE-WAY  
ST. PETE BEACH, FL 33706 US

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

LANDER, TERISUE MGRM  
1037 79TH ST SOUTH  
ST PETERSBURG, FL 33707 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: TERISUE LANDER

04/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LANDER, TERISUE  
Address: 449 CENTRAL AVENUE  
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: MGRM (X) Delete  
Name: WHEELER, SUSAN T  
Address: 30 SURF ROAD  
City-St-Zip: WESTPORT, CT 06880 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LANDER, TERISUE MGRM  
Address: 449 CENTRAL AVENUE SUITE 104  
City-St-Zip: ST PETERSBURG, FL 33701 US

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: TERISUE LANDER

MGRM

04/29/2009

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