

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054246

FILED  
May 01, 2009  
Secretary of State

Entity Name: LANDMARK PARTNERS, LLC

**Current Principal Place of Business:**

4600 SUMMERLIN RD.  
C2-587  
FORT MYERS, FL 33919 US

**New Principal Place of Business:**

**Current Mailing Address:**

4600 SUMMERLIN RD.  
C2-587  
FORT MYERS, FL 33919 US

**New Mailing Address:**

FEI Number: 20-4936183      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

LAND BUYERS USA, LLC  
4600 SUMMERLIN RD.  
C2-587  
FORT MYERS, FL 33919 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: CAMPBELL, KEITH  
Address: 4600 SUMMERLIN RD. #C2-587  
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGR (X) Change ( ) Addition  
Name: CAMPBELL, KEITH S MGR  
Address: 4600 SUMMERLIN RD  
City-St-Zip: FORT MYERS, FL 33919

Title: MGRM ( ) Delete  
Name: SMOKLER, JONATHAN  
Address: 4600 SUMMERLIN RD. #C2-587  
City-St-Zip: FORT MYERS, FL 33919

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

Title: MGRM ( ) Delete  
Name: GREENBERG, DANIEL  
Address: 4600 SUMMERLIN RD. #C2-587  
City-St-Zip: FORT MYERS, FL 33919

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

Title: MGRM ( ) Delete  
Name: SAL, DILORENZO  
Address: 4600 SUMMERLIN RD  
City-St-Zip: FORT MYERS, FL 33919

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: KEITH S CAMPBELL

MGR

05/01/2009

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