

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000057039

FILED  
Feb 18, 2009  
Secretary of State

Entity Name: COVENANT LAND GROUP, LLC

## Current Principal Place of Business:

3825 MCGREGOR BLVD.  
FORT MYERS, FL 33901

## New Principal Place of Business:

822 CYPRESS LAKE CIRCLE  
FORT MYERS, FL 33919

## Current Mailing Address:

2235 FIRST STREET  
FORT MYERS, FL 33901

## New Mailing Address:

822 CYPRESS LAKE CIRCLE  
FORT MYERS, FL 33919

FEI Number: 59-1150677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RANDOLPH, MICHAEL D ESQ  
2235 FIRST STREET  
FORT MYERS, FL 33901 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: ORR, JAMES W JR.  
Address: 2439 MCGREGOR BLVD.  
City-St-Zip: FORT MYERS, FL 33901

Title: MGR ( ) Delete  
Name: SHIMP, STEVE  
Address: 2439 MCGREGOR BLVD.  
City-St-Zip: FORT MYERS, FL 33901

Title: MGR ( ) Delete  
Name: JALVING, WARREN  
Address: 6011 W RIVERSIDE DR  
City-St-Zip: FORT MYERS, FL 33919

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: ORR, JAMES W JR.  
Address: 21 GEORGETOWN STREET  
City-St-Zip: FORT MYERS, FL 33919

Title: MGR (X) Change ( ) Addition  
Name: SHIMP, STEVE  
Address: 822 CYPRESS LAKE CIRCLE  
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: STEVEN C. SHIMP

MGR

02/18/2009

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