2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2007
Secretary of State

DOCUMENT# L06000065854

Entity Name: LAND BARONS UNLIMITED, LLC

Current Principal Place of Business:

1506 TRAVERTINE TERRACE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

1506 TRAVERTINE TERRACE
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 20-5124760 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

COLLINS, PATRICIA A
1506 TRAVERTINE TERRACE
SANFORD, FL 32771 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:	MGRM ( ) Delete
Name:	COLLINS, PATRICIA A
Address:	1506 TRAVERTINE TERRACE
City-St-Zip:	SANFORD, FL 32771 US
Title:	MGRM ( ) Delete
Name:	COLLINS, WALTER G
Address:	1506 TRAVERTINE TERRACE
City-St-Zip:	SANFORD, FL 32771 US
Title:	MGRM ( ) Delete
Name:	FOX, ANN E
Address:	30515 WEST THYME
City-St-Zip:	EUSTIS, FL 32736 US
Title:	MGRM ( ) Delete
Name:	FOX, MILTON T
Address:	30515 WEST THYME
City-St-Zip:	EUSTIS, FL 32736 US

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	MGRM (X) Change ( ) Addition
Name:	FOX, ANN E
Address:	30515 WEST THYME AVE.
City-St-Zip:	EUSTIS, FL 32736 US
Title:	MGRM (X) Change ( ) Addition
Name:	FOX, MILTON T
Address:	30515 W. THYME AVE.
City-St-Zip:	EUSTIS, FL 32736 US

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA A. COLLINS MGRM 03/26/2007

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