2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000103348

1. Entity Name SCOTT'S LANDING, LLC



FILED Jan 16, 2008 08:00 AN Secretary of State

Principal Place of Business

1120 WEST FIRST STREET, STE B SANFORD, FL 32771

Mailing Address

1120 WEST FIRST STREET, STE B SANFORD, FL 32771



01102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5777973

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BARKS, JAMES A 1120 WEST FIRST STREET, STE B SANFORD, FL 32771

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8.	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.	I am familiar with, and accept
	the obligations of registered agent.	

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 000000786688 01/17/08-80048-018 138.75

MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME BARKS, JAMES A 1120 WEST FIRST STREET, STE B STREET ADDRESS CITY-ST-ZIP SANFORD, FL 32771 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP มีวิจาณ (เกละ) NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shell 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:

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ABELL

James A. Barks

Barks 01/14/08

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daylime Phone #