

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000010816

**FILED**  
**Jun 17, 2009**  
**Secretary of State**

**Entity Name:** PRIME LAND ACQUISITIONS LLC

**Current Principal Place of Business:**

5207 ST PAUL STREET  
TAMPA, FL 33619

**New Principal Place of Business:**

2102 CLIMBING IVY DRIVE  
TAMPA, FL 33618

**Current Mailing Address:**

5207 ST PAUL STREET  
TAMPA, FL 33619

**New Mailing Address:**

2102 CLIMBING IVY DRIVE  
TAMPA, FL 33618

**FEI Number:** 26-1291366      **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:**

WU TRUST INC  
5207 ST PAUL STREET  
TAMPA, FL 33619    US

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

WU, HUNG L MR.  
2102 CLIMBING IVY DRIVE  
TAMPA, FL 33618    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: HUNG LIN WU

06/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: WU TRUST INC  
Address: 5207 ST PAUL STREET  
City-St-Zip: TAMPA, FL 33619

**ADDITIONS/CHANGES:**

Title: PRES      (X) Change ( ) Addition  
Name: WU, HUNG L MR.  
Address: 2102 CLIMBING IVY DRIVE  
City-St-Zip: TAMPA, FL 33618

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: HUNG LIN WU

PRES

06/17/2009

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