

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019278

Entity Name: I-40 LAND INVESTORS, LLC

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

2033 WOOD STREET
215
SARASOTA, FL 34237

New Principal Place of Business:

2033 WOOD STREET
215
SARASOTA, FL 34237

New Mailing Address:

2033 WOOD STREET
SUITE 215
SARASOTA, FL 34237

FEI Number: 20-8480016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENBERG, DAVID H ESQ.
8130 LAKWOOD MAIN STREET
SECOND FLOOR, SUITE 208
BRADENTON, FL 34202 US

Name and Address of New Registered Agent:

ROSENBERG, DAVID H ESQ.
1626 RINGLING BLVD.
SUITE 500
SARASOTA, FL 34236 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:

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HERBERT, JOHN W JR.
Address: 2033 WOOD STREET, SUITE 215
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: IMPERATORE, JOHN F JR
Address: 2033 WOOD STREET, SUITE 215
City-St-Zip: SARASOTA, FL 34237

Title: MGRM () Delete
Name: YEOMANS, MIKE
Address: 7723 CHARLESTON STREET
City-St-Zip: UNIVERSITY PARK, FL 34201

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: JOHN F. IMPERATORE, JR.

MGRM

04/20/2009

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