

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000036583

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: MTS LAND HOLDINGS, LLC

**Current Principal Place of Business:**

10554 WINTERS RUN  
TALLAHASSEE, FL 32312 US

**New Principal Place of Business:**

**Current Mailing Address:**

10554 WINTERS RUN  
TALLAHASSEE, FL 32312 US

**New Mailing Address:**

FEI Number: 20-4734951

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRIEDMAN, MARTIN S  
2180 W. STATE ROAD 434  
SUITE 2118  
LONGWOOD, FL 32779 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: TOWNSEND, CRAIG S JR.  
Address: 10554 WINTERS RUN  
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM ( ) Delete  
Name: SMITH, GARY JR  
Address: 1725 EAST MAHAN DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: MGRM ( ) Delete  
Name: MILLER, ROBERT A JR.  
Address: 720 STILES AVE.  
City-St-Zip: TALLAHASSEE, FL 32303 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CRAIG TOWNSEND

MGRM

04/25/2008

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