2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083540

Entity Name: GRAND LANDINGS, LLC

Address:

City-St-Zip:

3 FOREST DR

GREEN COVE SPRINGS, FL 32043

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4080 SCENIC DR MIDDLEBURG, FL 32068 **Current Mailing Address: New Mailing Address:** 4080 SCENIC DR MIDDLEBURG, FL 32068 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AFFINITY LAW FIRM, P.L 3947 BOULEVARD CENTER DR SUITE 101 JACKSONVILLE, FL 32207 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete TAYLOR, TRACY Name: Name: Address: 4080 SCENIC DR Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: Title: Title: () Delete () Change () Addition Name: TAYLOR, TRACY Name: Address: 4080 SCENIC DR Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: Title: () Delete Title: () Change () Addition VICKERMAN, RAY Name: Name: 3 FOREST DR Address: Address: City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: () Delete Title: Title: () Change () Addition Name: VICKERMAN, SUE Name:

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.

Address:

City-St-Zip:

SIGNATURE: GUST G. SARRIS, ESQ. MGRM 04/30/2009