

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000037057

Entity Name: FLORIDA TOD, LLC

FILED
Feb 01, 2009
Secretary of State

Current Principal Place of Business:

118 WEST ADAMS STREET
SUITE 700
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

118 WEST ADAMS STREET
SUITE 700
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGTON, MICHAEL E
118 WEST ADAMS STREET
SUITE 700
JACKSONVILLE, FL 32202 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: LB JAX DEVELOPMENT,, L.L.C.
Address: 118 WEST ADAMS STREET, SUITE 700
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGRM () Delete
Name: ATLANTIC COAST DEVEL, OPERS, L.L.C.
Address: 2008 RIVERSIDE AVENUE, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32204 US

ADDITIONS/CHANGES:

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: MICHAEL LANGTON

MGRM

02/01/2009

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