

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000049158

FILED
Apr 23, 2009
Secretary of State

Entity Name: ACKEN FAMILY LAND, LLC

Current Principal Place of Business:

99 NESBIT STREET
C/O GUY S. EMERICH
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

99 NESBIT STREET
C/O GUY S. EMERICH
PUNTA GORDA, FL 33950

New Mailing Address:

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

Name and Address of Current Registered Agent:

EMERICH, GUY S
99 NESBIT STREET
FARR, FARR, EMERICH, HACKETT
PUNTA GORDA, FL 33950 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: ACKEN, SASKIA
Address: POST OFFICE BOX 510295
City-St-Zip: PUNTA GORDA, FL 33951

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: SASKIA ACKEN

MGR

04/23/2009

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