

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000098446

FILED  
Feb 09, 2009  
Secretary of State

Entity Name: TPK LAND LLC

**Current Principal Place of Business:**

4630 N. UNIVERISTY DR.  
CORAL SPRING, FL 33067

**New Principal Place of Business:**

5779 NW 48TH DR.  
CORAL SPRING, FL 33067

**Current Mailing Address:**

4630 N. UNIVERISTY DR.  
CORAL SPRING, FL 33067

**New Mailing Address:**

5779 NW 48TH DR.  
CORAL SPRING, FL 33067

FEI Number: 26-3726183

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSON, HENRY W  
1401 UNIVERSITY DRIVE, SUITE 301  
CORAL SPRINGS, FL 33071 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: P&Z CONSTRUCTION INC.  
Address: 4630 N. UNIVERISTY DR.  
City-St-Zip: CORAL SPRING, FL 33067

Title: MGRM ( ) Delete  
Name: SCOWDEN-HUGHES, KRISTIN  
Address: 108 TWO PINE DRIVE  
City-St-Zip: GREENACRES, FL 33413

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: P&Z CONSTRUCTION INC.  
Address: 5779 NW 48TH DR.  
City-St-Zip: CORAL SPRING, FL 33067

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: PAUL ZWANGER

MGRM

02/09/2009

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