

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L99000003261

FILED
May 15, 2007
Secretary of State**Entity Name:** LYONS LAND CORP., LLC**Current Principal Place of Business:**9240 MARKETPLACE ROAD
SUITE 1
FORT MYERS, FL 33912**New Principal Place of Business:****Current Mailing Address:**9240 MARKETPLACE ROAD
SUITE 1
FORT MYERS, FL 33912**New Mailing Address:****FEI Number:** 65-0929843**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LYONS, BOBBY R
9240 MARKETPLACE ROAD
SUITE 1
FT. MYERS, FL 33912 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: MGR () Delete
Name: LYONS HOLDING INC,
Address: 9240 MARKETPLACE ROAD
City-St-Zip: FORT MYERS, FL 33912

Title: P () Delete
Name: LYONS, BOBBY R
Address: 9240 MARKETPLACE ROAD, SUITE 1
City-St-Zip: FORT MYERS, FL 33912

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: VP () Change (X) Addition
Name: HAMMOND, CHRIS
Address: 9240 MARKETPLACE ROAD SUITE 1
City-St-Zip: FORT MYERS, FL 33912

Title: VP () Change (X) Addition
Name: LYONS, NORMA L
Address: 9240 MARKETPLACE ROAD SUITE 1
City-St-Zip: FORT MYERS, FL 33912

Title: VP () Change (X) Addition
Name: ROSE, TIMOTHY W
Address: 9240 MARKETPLACE ROAD
City-St-Zip: FORT MYERS, FL 33912

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: BOBBY R LYONS

MGR

05/15/2007

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