2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2008
Secretary of State

DOCUMENT# L99000003261

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 (X)**

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

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

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

ADDITIONS/CHANGES:

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

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

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

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: CHRIS HAMMOND VP 02/27/2008

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