2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Mar 07, 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:

PEEPLES, PERRY
5551 RIDGEWOOD DRIVE
SUITE 101
NAPLES, FL 34108 US

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: C. PERRY PEEPLES 03/07/2008
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 03/07/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date