

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000168

FILED
Mar 15, 2007
Secretary of State

Entity Name: LANDMAR MANAGEMENT, LLC

Current Principal Place of Business:

10739 DEERWOOD PARK BLVD., SUITE 300
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

10739 DEERWOOD PARK BLVD., SUITE 300
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 56-2153540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: BURR, EDWARD E
Address: 10739 DEERWOOD PARK BLVD., SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM () Delete
Name: WEBB, H. THOMAS III
Address: 400 SOUTH TRYON STREET, SUITE 1300
City-St-Zip: CHARLOTTE, NC 28201

Title: MGRM () Delete
Name: FIELDS, ARTHUR
Address: 400 SOUTH TRYON STREET, SUITE 1300
City-St-Zip: CHARLOTTE, NC 28201

Title: MGRM (X) Delete
Name: POSTLETHWAITE, ROGER F
Address: 10739 DEERWOOD PARK BLVD., SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM (X) Delete
Name: CULLIS, JAMES T
Address: 7 SANDPIPER COURT
City-St-Zip: PALM COAST, FL 32137

Title: MGRM (X) Delete
Name: FURLONG, ROBERT E
Address: 10739 DEERWOOD PARK BLVD., SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: WEBB, H. THOMAS III
Address: 400 SOUTH TRYON STREET, SUITE 1300
City-St-Zip: CHARLOTTE, NC 28201

Title: MGR (X) Change () Addition
Name: FIELDS, ARTHUR
Address: 400 SOUTH TRYON STREET, SUITE 1300
City-St-Zip: CHARLOTTE, NC 28201

Title: () Change () Addition
Name:
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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 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: EDWARD E. BURR

MGR

03/15/2007

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