

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002625

FILED
Mar 07, 2006
Secretary of State

Entity Name: THIRD & FOURTH SOUTH DEVELOPERS, LLC

Current Principal Place of Business:

10161 CENTURION PARKWAY NORTH, SUITE 190
JACKSONVILLE, FL 32256

New Principal Place of Business:

10739 DEERWOOD PARK BLVD, SUITE 300
JACKSONVILLE, FL 32256

Current Mailing Address:

10161 CENTURION PARKWAY NORTH, SUITE 190
JACKSONVILLE, FL 32256

New Mailing Address:

10739 DEERWOOD PARK BLVD, SUITE 300
JACKSONVILLE, FL 32256

FEI Number: 01-0702327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURR, EDWARD E
10161 CENTURION PARKWAY NORTH, SUITE 190
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

BURR, EDWARD E
10739 DEERWOOD PARK BLVD, SUITE 300
JACKSONVILLE, FL 32256 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:

03/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LANDMAR GROUP, LLC,
Address: 10161 CENTURION PARKWAY NORTH, SUITE 190
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LANDMAR GROUP, LLC,
Address: 10739 DEERWOOD PARK BLVD, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

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

03/07/2006

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