2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# M03000004152

Entity Name: HOMES & LAND AFFILIATES, LLC

Current Principal Place of Business:

3060 PEACHTREE ROAD, SUITE 200
ATLANTA, GA 30305

New Principal Place of Business:

1600 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32310

Current Mailing Address:

3060 PEACHTREE ROAD, SUITE 200
ATLANTA, GA 30305

New Mailing Address:

PO BOX 5018
TALLAHASSEE, FL 32314

FEI Number: 32-0100668 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301 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/MEMBERS:

Title:	S	( ) Delete
Name:	ALTENBACH, JAMES S	
Address:	3060 PEACHTREE ROAD, SUITE 200	
City-St-Zip:	ATLANTA, GA 30305	
Title:	D	(X) Delete
Name:	BYNUM, FRANK K	
Address:	3060 PEACHTREE ROAD, SUITE 200	
City-St-Zip:	ATLANTA, GA 30305	
Title:	CEOD	(X) Delete
Name:	SCHMIDT FELLNER, F. BLAIR	
Address:	3060 PEACHTREE ROAD, SUITE 200	
City-St-Zip:	ATLANTA, GA 30305	
Title:	COB	(X) Delete
Name:	HOGAN, GERALD	
Address:	3060 PEACHTREE ROAD, SUITE 200	
City-St-Zip:	ATLANTA, GA 30305	
Title:	D	(X) Delete
Name:	LAZAR, MICHAEL	
Address:	3060 PEACHTREE ROAD, SUITE 200	
City-St-Zip:	ATLANTA, GA 30305	
Title:	D	(X) Delete
Name:	WALL, THOMAS R IV	
Address:	3060 PEACHTREE ROAD, SUITE 200	
City-St-Zip:	ATLANTA, GA 30305	

ADDITIONS/CHANGES:

Title:	MGRM	(X) Change ( ) Addition
Name:	ENDURANCE BUSINESS M, EDIA, INC.	
Address:	1600 CAPITAL CIRCLE SW	
City-St-Zip:	TALLAHASSEE, FL 32314	
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 for the exemption stated in Section 119.07(3)(i), 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: ROBERT A. HARDY MGRM 04/28/2004

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