2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# M04000002113

Entity Name: HAWK'S HAVEN GOLF COURSE COMMUNITY DEVELOPERS, LLC

Current Principal Place of Business:

10739 DEERWOOD PARK BLVD.
SUITE 300
JACKSONVILLE, FL 32256

New Principal Place of Business:

400 SOUTH TRYON STREET
SUITE 1300
CHARLOTTE, NC 28285

Current Mailing Address:

10739 DEERWOOD PARK BLVD.
SUITE 300
JACKSONVILLE, FL 32256

New Mailing Address:

400 SOUTH TRYON STREET
SUITE 1300
CHARLOTTE, NC 28285

FEI Number: 20-1203562 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURR, EDWARD E
10739 DEERWOOD PARK BLVD.
300
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

CT CORPORATION
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: ALLAN FARNELL, ASSISTANT SECRETARY 04/14/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LANDMAR MANAGEMENT,, 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 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: DALE BARR AS 04/14/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date