

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004269

FILED
Apr 24, 2006
Secretary of State

Entity Name: FLORIDIAN LAND INVESTMENT I, LLC

Current Principal Place of Business:

1420 RENAISSANCE DRIVE
PARK RIDGE, IL 60068

New Principal Place of Business:

Current Mailing Address:

1420 RENAISSANCE DRIVE
PARK RIDGE, IL 60068

New Mailing Address:

FEI Number: 13-4308817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: KONKEN, LEE
Address: 300 N. DEE ROAD
City-St-Zip: PARK RIDGE, IL 60068

Title: MGR () Delete
Name: KONKEN, ANDREA
Address: 1009 LUCERNE PARKWAY
City-St-Zip: CAPE CORAL, FL 33904

Title: MGR () Delete
Name: MARTIN, LARRY J
Address: 1420 RENAISSANCE DRIVE
City-St-Zip: PARK RIDGE, IL 60068

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change () Addition
Name: MARTIN, LARRY J
Address: 560 MONTEGO DR.
City-St-Zip: ELK GROVE VILLAGE, IL 60007

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: LARRY J. MARTIN

MGR

04/24/2006

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