2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M0600005684

1. Entity Name LAND 106580, LLC

Principal Place of Business

4900 WEST HUNDRED ROAD CHESTER, VA 23831

Mailing Address

4900 WEST HUNDRED ROAD CHESTER, VA 23831

FILED Apr 29, 2008 08:00 AN Secretary of State



01162008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 16-1773515 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

UPHOFF, BRIAN 1800 BAYSHORE DRIVE TERRA CEIA, FL 34250

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8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE_	Signature, typed or printed name of registered agent and little if applicable.	(NOTE Registered Agent signature required when reinstating) DATE	
FILE After May	NOWIII FEE IS \$138.75	(NOTE refusition Affait signature requires when remistant)) DATE	
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR UPHOFF FLORIDA LAND, LLC 4900 WEST HUNDRED ROAD CHESTER, VA 23831		
NAME STREET ADDRESS CITY-ST-ZIP		05/22/08-80053-008 143.7	5
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes if further certify that the information indicated on this report is true and accurate and that my 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 of trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OF AUTHORIZED REPRESENTATIVE

4-24.08

804-706-4702

Daytme Phone #