

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000002322

FILED
Jun 28, 2009
Secretary of State

Entity Name: AFCCO PENSACOLA LAND COMPANY, L.L.C.

Current Principal Place of Business:

4200 NORTHSIDE PARKWAY NW, BUILDING 12
ATLANTA, GA 30327

New Principal Place of Business:

Current Mailing Address:

4200 NORTHSIDE PARKWAY NW, BUILDING 12
ATLANTA, GA 30327

New Mailing Address:

FEI Number: 20-8964059 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM
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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BENTE, STEFAN
Address: 4200 NORTHSIDE PARKWAY NW, BUILDING 12
City-St-Zip: ATLANTA, GA 30327

Title: MGR () Delete
Name: FRIEDMAN, SAMUEL G
Address: 4200 NORTHSIDE PARKWAY NW, BUILDING 12
City-St-Zip: ATLANTA, GA 30327

Title: MGR () Delete
Name: PRIVATE TRUST CORPORATION LIMITED
Address: 4200 NORTHSIDE PARKWAY NW, BUILDING 12
City-St-Zip: ATLANTA, GA 30327

ADDITIONS/CHANGES:

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 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: C. EDWARD SAFFELL

CPA

06/28/2009

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