2007 FOR PROFIT CORPORATION

FILED May 02, 2007 8:00 am Secretary of State 05-02-2007 90096 017 ***150.00

ANNUAL REPORT

DOCUMENT # P00000110430 LANDINGS OF SARASOTA COUNTY, INC. 40100960 Principal Place of Business Mailing Address 2702 NORWOOD LANE 2702 NORWOOD LANE VENICE, FL 34292 VENICE, FL 34292 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-3549566 Not Applicable Country Zip Country Zio^{*} \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PREWETT, DANIEL L Street Address (P.O. Box Number is Not Acceptable) 5777 BENEVA RAOD SOUTH SARASOTA, FL 34233 City 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 familia the obligations of registere (agent) SIGNATURE Signature syped or o (NOTE: Registered Agent signature required when rensisting) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS PTD THLE Change ☐ Addition THUE Delete GRAY, STEVEN L NAME NAME STREET ADDRESS 2702 NORWOOD LANE STREET ADDRESS CITY-ST-ZIP VENICE, FL 34292 CITY-ST-ZIP VPSD Addition Change Change TITLE ☐ Delete TITLE GRAY, DEBRA J NAME NAME 2702 NORWOOD LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VENICE, FL. 34292 CITY-ST-ZIP Defete TITLE ☐ Change ☐ Addition TITLE NAME STHEET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - \$1- ZIP CHY-SI-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee Impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment