


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

**Feb 28, 2007 08:00 AM  
Secretary of State**

DOCUMENT # P04000104714  
1. Entity Name  
PREFERRED LAND AND HOMES, INC.



Principal Place of Business: 2652 NE, 24TH ST. OCALA, FL 34470  
Mailing Address: PO BOX 6406 OCALA, FL 34478



02112007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number: 27-0100127 Applied For: Not Applicable  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NICHOLS, HAROLD C  
2652 NE 24TH ST.  
OCALA, FL 34470

**DO NOT WRITE IN THIS SPACE**

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00**  
9. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	NICHOLS, HAROLD C
STREET ADDRESS	POST OFFICE BOX 6406
CITY-ST-ZIP	OCALA, FL 34478
TITLE	STD
NAME	NICHOLS, MATTHEW D
STREET ADDRESS	POST OFFICE BOX 6406
CITY-ST-ZIP	OCALA, FL 34478
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1000000650557  
03/08/07-80018-013 150.00

**DO NOT WRITE IN THIS SPACE**

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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Harold C. Nichols, President 2/27/07 352 622 9-  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #