

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000034829

FILED
Sep 13, 2005
Secretary of State

Entity Name: CONFEDERATE LANDING, INC.

Current Principal Place of Business:

243 KIRKLAND RD
NEW SMYRNA BCH, FL 34667 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 2071
NEW SMYRNA BCH, FL 32170 US

New Mailing Address:

FEI Number: 39-3376324 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWEN B LOVEJOY
245 KIRKLAND RD
NEW SMYRNA BCH, FL 32169 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OWEN B LOVEJOY DDS,
Address: P O BOX 2071 N/A
City-St-Zip: NEW SMYRNA BCH, FL 32170

Title: VP () Delete
Name: LOVEJOY, OWEN B
Address: 4040 COMMERCIAL WAY
City-St-Zip: SPRING HILL, FL 34606

Title: S () Delete
Name: SHERMAN, JAMES H
Address: 1411 BRANDY SHOALS DR
City-St-Zip: CONYERS, GA 30013

Title: T () Delete
Name: SHERMAN, JANET L
Address: 1411 BRANDY SHOALS DR
City-St-Zip: CONYERS, GA 30013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES H. SHERMAN

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09/13/2005

Electronic Signature of Signing Officer or Director

_____ Date