

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 264788

FILED
Aug 25, 2004
Secretary of State

Entity Name: CAMPUS LANDS CORP.

Current Principal Place of Business:

5800 NW 39TH AVE
104
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 370
STANFORDVILLE, NY 12581 US

New Mailing Address:

FEI Number: 59-1009741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTEMPORARY MGMT
5800 NW 39TH AVE
SUITE 104
GAINESVILLE, FL 32606 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: PSD () Delete
Name: GIARDINO, LUCIE
Address: ALGER COURT, RIVERMERE #2B
City-St-Zip: BRONXVILLE, NY 10708

Title: VP () Delete
Name: WECK, BRIAN
Address: P O BOX 370
City-St-Zip: STANFORDVILLE, NY 12581

Title: VP () Delete
Name: WECK, DIANE
Address: P O BOX 370
City-St-Zip: STANFORDVILLE, NY 12581

Title: VP () Delete
Name: GIARDINO, CAROL
Address: ALGER COURT, RIVERMERE #2B
City-St-Zip: BRONXVILLE, NY 10708

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: BRIAN WECK

VP

08/25/2004

Electronic Signature of Signing Officer or Director

Date