2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 184515

Entity Name: FIVE POINTS LAND CO., INC.

FILED Mar 08, 2005 Secretary of State

				New Poincine I Plans of Provinces				
Current Principal Place of Business:				New Principal Place of Business:				
PO BOX 80 ST PETERS	1 SBURG, FL	33731						
Current Mailing Address:				New Mailing Address:				
PO BOX 80 ST PETERS	1 SBURG, FL	33731						
FEI Number:	59-0870600	FEI Number Applied For ()	FEI Numb	ber Not Appli	cable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Na					lame and Address of New Registered Agent:			
BOND,WILI 200 BEACH UNIT 1 ST PETERS		33701 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.								
SIGNATUR	E:							
	Electro	nic Signature of Registered Agen	nt			Date		
Election Cam	paign Financii	ng Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	MELLENEY, L 301 2ND ST N		1	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	VD (CODDING, RI 550 SOUTH H LOS ANGELE	OPE STREET	1	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	BOND, WILLIA 200 BEACH D) Delete AM JR RIVE NE UNIT 1 URG, FL 33701	1	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	D (BOND, WILLI, 800 34TH AVE ST PETE, FL	ENUE NORTH	1	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	BOND, SAMU ONE BEACH I		1	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	BOND, GARY 100 BEACH D) Delete G RIVE NE #901 URG, FL 33701	1	Title: Name: Address: City-St-Zip:	D (X) BOND, CARY G 100 BEACH DR ST PETERSBUR	IVE NE #901		

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: WILLIAM BOND, JR. MR. 03/08/2005