2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2009
Secretary of State

DOCUMENT# 264928

Entity Name: MUTUAL LAND COMPANY INC

Current Principal Place of Business:

2272 BOYD RD
PERRY, FL 32347

New Principal Place of Business:

Current Mailing Address:

2272 BOYD RD
PERRY, FL 32347

New Mailing Address:

FEI Number: 59-1009981 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOUGHRIDGE, MEMORIE L
3020 HAWKS LANDING DR
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

LOUGHRIDGE, MEMORIE L
2220 BOYD ROAD
PERRY, FL 32347 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.

SIGNATURE: 01/31/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LOUGHRIDGE, GLENN E
Address: 1860 BEVERLY CIR
City-St-Zip: CLEARWATER, FL 33764

Title: P ( ) Delete
Name: LOUGHRIDGE, THOMAS E
Address: 1860 BEVERLY CIR
City-St-Zip: CLEARWATER, FL

Title: TSD ( ) Delete
Name: LOUGHRIDGE, MEMORIE L.
Address: 3020 HAWKS LANDING DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: D ( ) Delete
Name: KERR LOUGHRIDGE, ANN
Address: 2817 W HAWTHORNE RD
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LOUGHRIDGE, GLENN E
Address: 2817 WEST HAWTHORNE ROAD
City-St-Zip: TAMPA, FL 33611

Title: P (X) Change ( ) Addition
Name: LOUGHRIDGE, THOMAS E
Address: 10668 N. SUNFLOWER POINT
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: TSD (X) Change ( ) Addition
Name: LOUGHRIDGE, MEMORIE L.
Address: 2220 BOYD RD.
City-St-Zip: PERRY, FL 32347

Title: D (X) Change ( ) Addition
Name: KERR LOUGHRIDGE, ANN
Address: 2817 W HAWTHORNE RD
City-St-Zip: TAMPA, FL 33611

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MEMORIE L. LOUGHRIDGE TSD 01/31/2009
Electronic Signature of Signing Officer or Director — Date