

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Jan 21 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998  
 FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS



DOCUMENT # 377516 (0)  
 1. Corporation Name  
**LAND RESOURCES, INC.**



Principal Place of Business: SAN SERVANDO AVE WARM MINERAL SPRINGS FL 34287  
 Mailing Address: SAN SERVANDO AVE WARM MINERAL SPRINGS FL 34287

DO NOT WRITE IN THIS SPACE

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		4. FEI Number		Applied For	
SAN SERVANDO AVE WARM MINERAL SPRINGS FL 34287		SAN SERVANDO AVE WARM MINERAL SPRINGS FL 34287		02/23/1971		59-1348732		Not Applicable	
5. Certificate of Status Desired		6. Election Campaign Financing Trust Fund Contribution		7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30		9. Yes No	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
\$8.75 Additional Fee Required		\$5.00 May Be Added to Fees							

9. Name and Address of Current Registered Agent  
**HERRON, SAM H. JR**  
**12200 SAN SERVANDO AVENUE**  
**WARM MINERAL SPRINGS FL 34287**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City  
 FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERRON JR, SAM H	1.2 NAME	
STREET ADDRESS	711 VALENCIA RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANIER, HAZEL I	2.2 NAME	
STREET ADDRESS	4848 HUNTLEIGH DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(d), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an endorsement.

SIGNATURE: *Sam H Herron Jr* **SAM H HERRON JR** 1-9-98 NONE

CR2E034 (10/97)