2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 412124

Entity Name: LAMARTIN ACRES, INC

FILED Feb 27, 2002 8:00 AM Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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905 S W 4TH AVE OKEECHOBEE, FL 34974

Current Mailing Address: New Mailing Address:

821 SOUTH BLVD
TAMPA, FL 336062904 US
821 S BOULEVARD
TAMPA, FL 336062904 US

FEI Number: 59-1574740 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILSON, BOBBIE L
910 SW 3RD AVE
OKEECHOBEE, FL 34974

WILSON, BOBBIE L
910 SW 3RD AVE
OKEECHOBEE, FL 34974

OKEECHOBEE, FL 34974

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: BOBBIE L. WILSON 02/27/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: () Change () Addition

 Name:
 LAMARTIN, WILMA,
 Name:

 Address:
 905 SW 4TH AVE
 Address:

 City-St-Zip:
 OKEECHOBEE, FL
 City-St-Zip:

 Name:
 LAMARTIN, WILLIAM F,
 Name:
 LAMARTIN, WILLIAM F,

 Address:
 821 SOUTH BOULEVARD
 Address:
 821 S BOULEVARD

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:
 TAMPA, FL

Title: VSD () Delete Title: () Change () Addition

 Name:
 WILSON, BOBBIE L.,
 Name:

 Address:
 910 S.W. 3RD AVE.
 Address:

 City-St-Zip:
 OKEECHOBEE, FL
 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: BOBBIE L. WILSON V 02/27/2002