

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State

05-11-2000 90164 001 ***300.00

DOCUMENT # 546859

1. Entity Name

SOUTHERN LAND GROUP, INC.

Principal Place of Business

Mailing Address

3501 SW CORPORATE PKWY
 PALM CITY FL 34990
 US

3501 SW CORPORATE PKWY
 PALM CITY FL 34990-8150
 US

2. Principal Place of Business

3. Mailing Address

3399 PGA Blvd.
 Suite, Apt. #, etc.
Suite 450

3399 PGA Blvd.
 Suite, Apt. #, etc.
Suite 450

City & State
Palm Beach Gardens, FL

City & State
Palm Beach Gardens, FL

Zip
33410

Country
USA

Zip
33410

Country
USA

4. FEI Number **59-1772247**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRY, STEPHEN
 3501 SW CORPORATE PKWY
 PALM CITY FL 34990

Name
Fry, Stephen
 Street Address (P.O. Box Number, if Not Acceptable)
3399 PGA Blvd
Suite 450
 City
Palm Beach Gardens, FL Zip Code
33410

8. 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 *[Signature]* *Stephen Fry* *4/24/00*
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DST	<input type="checkbox"/> Delete
NAME	ENGLISH, BETTY	
STREET ADDRESS	3501 SW CORPORATE PKWY	
CITY-ST-ZIP	PALM CITY FL	
TITLE	DP	<input type="checkbox"/> Delete
NAME	CUMMINGS, PETER	
STREET ADDRESS	3501 SW CORPORATE PKWY	
CITY-ST-ZIP	PALM CITY FL	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	FRY, STEPHEN	
STREET ADDRESS	3501 SW CORPORATE PKWY	
ST-ZIP	PALM CITY FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	CUMMINGS, KEITH L	
STREET ADDRESS	3501 SW CORPORATE PKWY	
ST-ZIP	PALM CITY FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
ST-ZIP		

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>3399 PGA Blvd., Suite 450</i>
STREET ADDRESS	<i>Palm Beach Gardens, FL 33410</i>
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>3399 PGA Blvd, Suite 450</i>
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CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with an officer like empowered.

SIGNATURE: *[Signature]* *Stephen Fry* *4/24/00* *(561) 630-6110*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #
VICE President

CR2E034 (9/99)