2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 550184

Entity Name: LAND OF BROMELIADS, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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10319 MOORE ROAD GOTHA, FL 34734

Current Mailing Address: New Mailing Address:

PO BOX 8 GOTHA, FL 34734

FEI Number: 59-1791526 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:

ROSS, ROBERT C
10319 MOORE ROAD
GOTHA, FL 34734 US
ROSS, ROBERT
10319 MOORE ROAD
GOTHA, FL 34734 US
GOTHA, FL 34734 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: ROBERT ROSS 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:

 Name:
 HARVEY, JAMES E III
 Name:

 Address:
 PO BOX 8
 Address:

 City-St-Zip:
 GOTHA, FL 34734
 City-St-Zip:

Title: V (X) Delete Title: () Change () Addition

 Name:
 WOOD, FRANCES H
 Name:

 Address:
 PO BOX 8
 Address:

 City-St-Zip:
 GOTHA, FL 34734
 City-St-Zip:

Title: MD () Delete Title: MD (X) Change () Addition

 Name:
 ROSS, ROBERT C
 Name:
 ROSS, ROBERT

 Address:
 PO BOX 8
 Address:
 PO BOX 8

 City-St-Zip:
 GOTHA, FL 34734
 City-St-Zip:
 GOTHA, FL 34734

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: ROBERT ROSS MD 04/30/2007