## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## **FILED** Mar 29, 2007 08:00 AM **DOCUMENT # 557678 Secretary of State** DIVERSIFIED LAND CORPORATION, INC. Principal Place of Business Mailing Address POST OFFICE BOX 1540 POST OFFICE BOX 1540 WINTER PARK, FL 32790 WINTER PARK, FL 32790 No Chg-P CR2E034 (11/05) 03262007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1845567 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOWE, SANDRA DO NOT WRITE POST OFFICE BOX 1540 WINTER PARK, FL 32790 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Recistered Agent moneture required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS LOWE, SANDRA NAME STREET ADORESS 55A AVENUE RD. STE 402 CITY-ST-ZP TORONTO, ON M5R2G3 TITLE NAME UC0000683989 STREET ADDRESS 04/06/07-80011-021 150.00 CITY-ST-ZIP DO NOT WRITE STREET ADDRES CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same tegal 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 10 or Block 11 if changed, or on an attachment with appearance of the component of the receiver or trustee empowered.