2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 594484

Entity Name: DELRAY LAND, INC.

2013 NW 2ND AVENUE

DELRAY BEACH, FL 33444

Address:

City-St-Zip:

FILED Jan 07, 2008 Secretary of State

Current P	rincipal Place of Business:	New Principal Place o	New Principal Place of Business:	
	GEORGE BUSH BLVD.			
STE 307 DELRAY E	BEACH, FL 33483 US			
Current N	lailing Address:	New Mailing Address:	1	
	BUSH BLVD			
STE 307 DELRAY E	BEACH, FL 33483			
FEI Number	: 59-1868847 FEI Number Applied For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	I Address of Current Registered Age	nt: Name and Address of	New Registered Agent:	
TESKE, LE 1177 GEO 307	EON E PRGE BUSH BLVD.			
DELRAY E	BCH, FL 33483 US			
	e named entity submits this statement for e of Florida.	r the purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registere	ed Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () Delete TESKE, LEON E 783 SEVILLA DRIVE BOCA RATON,, FL 33432	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	CTD () Delete JACOBUS, GEORGE H 2999 N OCEAN BLVD GULF STREAM, FL 33483	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () Delete JACOBUS, CATHERINE H 2999 N OCEAN BLVD GULF STREAM, FL 33483	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	S () Delete KNOOP, CECELIA M	Title: (Name:) Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: LEON E TESKE P 01/07/2008