2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** 654726 1. Entity Name _ T. & P. LAND, INC.

FILED May 24, 2002 8:00 am § Secretary of State 05-24-2002 91300 010 ***150.00

Principal Pla											
	ace of Busines	S	Mailing Address			7					
1482 MÅIN STREET			1482 MAIN STREET								
P O BOX 277			P O BOX 277								
CHIPLEY FL 32428			CHIPLEY FL 32428				I TRACKE AMERICAN	Hari 1801 ilan 1	Hist e keli ele	II B: B IT B I C 11	8 (
US *			US								
2. Principal	Place of Busin	ness	3. Mailing Address				I ISBRIG ENGLE BINGE B	(1881) 1881) 11818 <u>1</u>		 	01011 01011 1 06 1
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State			4. FEI Number 59-2029087 Applied For Not Applicable						
Zip Country		Country	Zip Country		у	5. Certificate of Status Desired					Iditional
	6. Name	and Address of Current R	egistered Agent	.1		7. N	lame and Address	of New Regi			
	·				Name						
PIERCE, FRANK A.			Street Address			(P.O. Box Number is Not Acceptable)					
	IN STREET		-								
Unificit	FL 32428				City					T =:	
					City				FL	Zip Coc	le
8. The above	e named entity	submits this statement for	he purpose of changing its	registered	office or registe	red age	ent, or both, in the S	State of Florida	a.	<u>' </u>	
SIGNATURE	Signature, Wood	Printed name of registered age with	SHO			FR	HIVK A	PIERCE		4-30	02_
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	 :	Agent signature required	d when rei	instating)		DATE		-
9. This corp	poration is eligi	ble to satisfy its Intangible and elects to do so.	FILE NOW!				10. Election Cam	npaign Financ	ina	\$ 5.0	10 May Be
	rrequirement a eria on back)	ind elects to do so.	After May 1, 20	02 Fee w	ill be \$550.00			ontribution.			to Fees
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11.		<u>.</u>	Make Check Payab		partment of Sta			-			
		OFFICERS AND D	IRECTORS	12.	partment of Sta		DITIONS/CHANGES	-	RS AND E	DIRECTOR	S IN 11
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TITLE NAME	PIERCE, FI	OFFICERS AND D	IRECTORS	12. TITLE NAME	ADDRESS			-	RS AND E	DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PIERCE, FI	OFFICERS AND D RANK A. IWAY 77, SOUTH	IRECTORS	12. TITLE NAME	ADDRESS			-	RS AND E	DIRECTOR	S IN 11
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i nereby 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 teport 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 a total like empowered.

SIGNATURE:

850-631-7606