
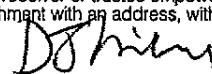


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # 684174		
1. Entity Name SOUTHSIDE LAND COMPANY.		
Principal Place of Business P.O. BOX 7691 JACKSONVILLE, FL 32238 US		Mailing Address P.O. BOX 7691 JACKSONVILLE, FL 32238 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MILNE, DOUGLAS J. 4595 LEXINGTON AVENUE JACKSONVILLE, FL 32210		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5 Adm. Fee
10. OFFICERS AND DIRECTORS		
TITLE	DSV	
NAME	MILNE, DOUGLAS J	
STREET ADDRESS	4595 LEXINGTON AVE #100	
CITY-ST-ZIP	JACKSONVILLE, FL 00000,	
TITLE	DP	
NAME	ASHBY, C L G	
STREET ADDRESS	1604 STOCKTON ST.	
CITY-ST-ZIP	JACKSONVILLE, FL 00000,	
TITLE	DV	
NAME	LEMMEL, DAVID E	
STREET ADDRESS	1303 PULLEN RD	
CITY-ST-ZIP	JACKSONVILLE, FL 00000,	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained indicated on this report or supplemental report is true and accurate and that my signature shall have the of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  DS MILNE		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		