

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 02 1996 8:00 am
Secretary of State

DOCUMENT # 849604 (4)

1. Corporation Name

INDEPENDENCE LAND AND CAPITAL, INC.

Principal Place of Business

4000 129TH STREET W
CORTEZ FL 34215
US

Mailing Address

96 CUMMINGS POINT ROAD
STAMFORD CT 06902
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

HAMMERSLEY, PHILIP N. E
1819 MAIN STREET
SUITE 610
SARASOTA FL 34236

3. Date Incorporated or Qualified

07/01/1981

3a. Date of Last Report

05/01/1995

4. FEI Number

58-1407235

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(Note: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE V
NAME HILL, DON
STREET ADDRESS 3900 EL CONQUISTADOR PKWY
CITY-ST-ZIP BRADENTON FL

DELETE

TITLE DVT
NAME THUNG, ROY T.K.
STREET ADDRESS 44 BALMORAL CRESCENT
CITY-ST-ZIP WHITE PLAINS NY

DELETE

TITLE V
NAME KEISER, ROBERT T.
STREET ADDRESS 8 MOUNTAIN WOOD DRIVE
CITY-ST-ZIP GREENWICH CT

DELETE

TITLE VD
NAME LAPIN, STEVEN B.
STREET ADDRESS 23 BARNES ROAD, WEST
CITY-ST-ZIP STAMFORD CT

DELETE

TITLE VS
NAME KETTIG, DAVID T.
STREET ADDRESS 10 BRYON LANE
CITY-ST-ZIP LARCHMONT NY

DELETE

TITLE PD
NAME NETTER, EDWARD
STREET ADDRESS 77 WINDING LN
CITY-ST-ZIP GREENWICH CT

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an amendment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David T. Kettig, Secretary Jan. 17, 1996

203-358-8000

Date

Daytime Phone #

CR2E034 (12/95)