2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2006
Secretary of State

DOCUMENT# F04000001056

Entity Name: CROSLAND, INC.

Current Principal Place of Business:

227 W. TRADE ST., SUITE 800
CHARLOTTE, NC 28202

New Principal Place of Business:

Current Mailing Address:

227 W. TRADE ST., SUITE 800
CHARLOTTE, NC 28202

New Mailing Address:

FEI Number: 56-0192763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

READER, PERRY J
C/O CROSLAND, INC.
58580 T.G. LEE BLVD., SUITE 200
ORLANDO, FL 32822 US

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.

SIGNATURE: PERRY J READER 02/28/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: CROSLAND, JOHN JR
Address: 227 W. TRADE ST., SUITE 800
City-St-Zip: CHARLOTTE, NC 28202

Title: C ( ) Delete
Name: CROSLAND, JOHN III
Address: 227 W. TRADE ST., SUITE 800
City-St-Zip: CHARLOTTE, NC 28202

Title: DP ( ) Delete
Name: MANSFIELD, TODD W
Address: 227 W. TRADE ST., SUITE 800
City-St-Zip: CHARLOTTE, NC 28202

Title: VP ( ) Delete
Name: FRIDMAN, RONNI B
Address: 227 W. TRADE ST., SUITE 800
City-St-Zip: CHARLOTTE, NC 28202

Title: S ( ) Delete
Name: BAILEY, PATRICK JR
Address: 214 N. TRYON ST., 47TH FLOOR
City-St-Zip: CHARLOTTE, NC 28202

Title: T ( ) Delete
Name: LONG, EDWARD F
Address: 227 W. TRADE ST., SUITE 800
City-St-Zip: CHARLOTTE, NC 28202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CROSLAND, JOHN JR
Address: 227 W. TRADE ST., SUITE 800
City-St-Zip: CHARLOTTE, NC 28202

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: CATHLEEN HARDMAN VP 02/28/2006
Electronic Signature of Signing Officer or Director Date