2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005708

Entity Name: INTERNATIONAL LAND SERVICES, INC.

FILED Jan 09, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
621 24TH AVE SW NORMAN, OK 73069					
Current Mailing Address:			New Mailing Address:		
621 24TH AVE SW NORMAN, OK 73069					
FEI Number:	73-1350293	FEI Number Applied For () FEI Nu	mber Not Appli	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
LAJOIE, JOHN 2075 CENTRE POINTE BLVD TALLAHASSEE, FL 32308 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:					
	Electroni	c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITION				NS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () FULLER, MARK 621 24TH AVE S NORMAN, OK 7	SW .	Title: Name: Address: City-St-Zip:	D (X) Change () Addition FULLER, MARK 621 24TH AVE SW NORMAN, OK 73069	
Title: Name: Address: City-St-Zip:	STEVENS, TER	MILLS RD SUITE 2	Title: Name: Address: City-St-Zip:	C (X) Change () Addition STEVENS, TERRY 1700 N VALLEY MILLS RD SUITE 2 WACO, TX 76710	
Title: Name: Address: City-St-Zip:	D () GLICKMAN, ROI 1 FIRST AMERIC SANTA ANA, CA	CAN WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () WEBB, PHIL 5 FIRST AMERIC SANTA ANA, CA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () SMITH, TERRY 621 24TH AVE S NORMAN, OK 7	SW .	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () OUTLAND, R CF 5265 E BAY DR CLEARWATER,	#424	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition STROM, EARL C 621 24TH AVE SW NORMAN, OK 73069	

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: MARK FULLER D 01/09/2007