2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 15, 2004 08:00 AM --DOCUMENT # F12285 **Secretary of State** GILL LAND AND TIMBER INVESTMENTS, INC. Principal Place of Business Mailing Address 6210 NW 128TH ST. 6210 NW 128TH ST. C/O RANDY L. GILL GAINESVILLE, FL 32653 C/O RANDY L. GILL GAINESVILLE, FL 32653 US US 01092004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2141430 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent GILL, RANDY L. DO NOT WRITE 6210 NW 128TH ST GAINESVILLE, FL 32653 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and this if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE GILL, RANDY L. NAME STREET ADDRESS 6210 NW 128TH ST. CITY - ST - ZIP GAINESVILLE, FL 32653 กกร U00000005195 NAME 01/15/04-80043-018 150:00 STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 suppliermental 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 truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addings, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP