

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90350 040 ***150.00

DOCUMENT # G13339

1. Entity Name
BUTLER LANDING, INC.



Principal Place of Business
**1301 RIVERPLACE BLVD
STE 1609
JACKSONVILLE, FL 32207 US**

Mailing Address
**1301 RIVERPLACE BLVD
STE 1609
JACKSONVILLE, FL 32207 US**

2. Principal Place of Business - No P.O. Box #
501 Riverside Ave.

3. Mailing Address
501 Riverside Ave.

Suite, Apt. #, etc.
Ste. 601

Suite, Apt. #, etc.
Ste. 601

City & State
Jacksonville, FL

City & State
Jacksonville, FL

Zip
32202

Country
US

Zip
32202

Country
US

04182008 Chg-P CR2E034 (12/06)

4. FEI Number
59-2288668

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PEEK, EUGENE G III
1301 RIVERPLACE BLVD
STE 1609
JACKSONVILLE, FL 32207**

7. Name and Address of New Registered Agent

Name
501 Riverside Ave., Ste. 601

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

City
Jacksonville

State
FL

Zip Code
32202

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

Eugene G Peek III

04/21/08

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
DPS	PEEK, EUGENE G III	1301 RIVERPLACE BLVD STE 1609	JACKSONVILLE, FL 32207	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		501 Riverside Ave., Ste. 601	Jacksonville, FL 32202	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EG Peek III, President

04/21/08

Date

(904) 399-1609

Daytime Phone #