

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2007 08:00 AM
Secretary of State

DOCUMENT # K77311

1. Entity Name
U.S. LAND & INVESTMENTS, INC.



Principal Place of Business
10490 SPRINGHILL DR
SPRINGHILL, FL 34608 US

Mailing Address
C/O DANIEL P. MARACICH
13036 EVERARD DR
SPRING HILL, FL 34609 US

DO NOT WRITE IN THIS SPACE



01152007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2948539

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MARACICH, DANIEL P.
13036 EVERARD DR
SPRING HILL, FL 34609

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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 _____

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

(NOTE: Registered Agent signature required when restoring)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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	PVTS MARACICH, DANIEL P. 13036 EVERARD DR. SPRING HILL, FL 34609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENGESBACH, ALAN F 6122 BEAR TRAIL SPRING HILL, FL 34607
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/14/07-80047-007 150.00

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IN THIS SPACE**

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

1-19-07

Date

Daytime Phone # _____