

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000022

FILED
Apr 29, 2008
Secretary of State

Entity Name: NORTH FLORIDA LAND TRUST, INC.

Current Principal Place of Business:

1911 WILLIAMS ST.
JACKSONVILLE, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 51181
JACKSONVILLE BEACH, FL 322401181

New Mailing Address:

FEI Number: 59-3609167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCQUILKIN, WILLIAM JR
225 LAMPLIGHTER LANE
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ED () Delete
Name: VANDEN HOUTEN, CATHERINE
Address: 545 WOODCIRCLE DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: P () Delete
Name: STRICKLAND, DAVID
Address: 300 WEST ADAMS STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: T () Delete
Name: WALKER, LINDA D
Address: 6620 SOUTHPPOINT DR S, STE 310
City-St-Zip: JACKSONVILLE, FL 32216

Title: VP () Delete
Name: GROSS-ARNOLD, MELISSA
Address: 245 RIVERSIDE AVE, STE 150
City-St-Zip: JACKSONVILLE, FL 32202

Title: P () Delete
Name: MIDDLEBROOK, MARK
Address: 21 SAILFISH DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S () Delete
Name: CONNOLLY, CARA
Address: 7720 FINANCIAL WAY STE 100
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: BARNES, BONNIE E
Address: 1911 WILLIAMS ST.
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PP (X) Change () Addition
Name: STRICKLAND, DAVID
Address: 300 WEST ADAMS STREET
City-St-Zip: JACKSONVILLE, FL 32202

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: S (X) Change () Addition
Name: EVENS, RON
Address: 13689 LONGS LANDING RD. W
City-St-Zip: JACKSONVILLE, FL 322255423

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE E. BARNES

ED

04/29/2008

Electronic Signature of Signing Officer or Director

Date