

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000002311

FILED
Apr 29, 2003
Secretary of State

Entity Name: SOUTH FLORIDA SMART GROWTH LAND TRUST, INC.

Current Principal Place of Business:

150 SE 2ND AVE., STE. 709
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

150 SE 2ND AVE., STE. 709
MIAMI, FL 33131

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASHINGTON, LYNN C
150 SE 2ND AVE., STE. 709
MIAMI, FL 33131

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: D () Delete
Name: PETREY, RODERICK N
Address: 701 BRICKELL AVE., STE. 3000
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: STARRETT, BEN
Address: 150 S.E. 2ND AVE.
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: BUTLER, BERNICE
Address: 150 S.E. 2ND AVE.
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: DOWDLE, BETH
Address: 224 DATURA ST.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: VODICKA, SUSAN S
Address: 1101 BRICKELL AVE., STE. 703
City-St-Zip: MIAMI, FL 33131

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: HENDERSON, CLAY
Address: 200 S. ORANGE AVE., STE. 2600
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RODERICK N. PETREY

D

04/29/2003

Electronic Signature of Signing Officer or Director

Date

COPELAND, JOHN D
100 SOUTHEAST 2ND STREET
MIAMI, FL 33131