2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000311

Entity Name: UNITED LAND ALLIANCE, INC.

FILED May 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1859 NORTHGATE BLVD 5824 BEE RIDGE RD #446 SARASOTA, FL 34234 SARASOTA, FL 34233

Current Mailing Address: New Mailing Address:

1180 52ND ST 5824 BEE RIDGE RD #446 SARASOTA, FL 34234 SARASOTA, FL 34233

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WARD, LONNIE JR.

1180 52ND ST

SARASOTA, FL 34234 US

WARD, LONNIE JR.

5824 BEE RIDGE RD #446

SARASOTA, FL 34233 US

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: 05/06/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PSD () Delete
 Title:
 PSD (X) Change () Addition

 Name:
 WARD, LONNIE JR.
 Name:
 WARD, LONNIE JR.

 Address:
 1180 52ND ST
 Address:
 5824 BEE RIDGE RD #446

Address: 1180 52ND ST Address: 5824 BEE RIDGE RD #446
City-St-Zip: SARASOTA, FL 34234 City-St-Zip: SARASOTA, FL 34233

Address: 1180 52ND ST Address: 5824 BEE RIDGE RD #446
City-St-Zip: SARASOTA, FL 34234 City-St-Zip: SARASOTA, FL 34233

 Name:
 TROUPE, DARLENE
 Name:
 TROUPE, DARLENE

 Address:
 1180 52ND ST
 Address:
 5824 BEE RIDGE RD #446

 City-St-Zip:
 SARASOTA, FL 34234
 City-St-Zip:
 SARASOTA, FL 34233

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: LONNIE WARD, JR. PSD 05/06/2005