

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003759

FILED
Feb 27, 2008
Secretary of State

Entity Name: SUSTAINING COMMUNITY LANDS, INC.

Current Principal Place of Business:

6014 SW MAPP ROAD
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1517
PALM CITY, FL 34991 US

New Mailing Address:

FEI Number: 01-0865411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAWSON, MARY E
6014 S.W. MAPP ROAD
PALM CITY, FL 34990 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: D () Delete
Name: DAWSON, MARY E
Address: 6014 S.W. MAPP ROAD
City-St-Zip: PALM CITY, FL 34990 US

Title: D () Delete
Name: MARTINELLI, DAN
Address: 8438 SW 48 AVENUE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: MORALES, MARGARET W
Address: 13456 HARBOUR RIDGE BLVD.
City-St-Zip: PALM CITY, FL 34990

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:

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: MARY E. DAWSON

D

02/27/2008

Electronic Signature of Signing Officer or Director

_____ Date