2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08549

Entity Name: FLORIDA LAND COUNCIL, INC.

FILED Jan 15, 2004 Secretary of State

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

310 W. COLLEGE AVE.

TALLAHASSEE, FL 32301 US

Current Mailing Address: New Mailing Address:

310 W. COLLEGE AVE.

TALLAHASSEE, FL 32301 US

FEI Number: 59-2607230 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LITTLEJOHN, CHARLES B 310 WEST COLLEGE AVENUE TALLAHASSEE, FL 32301 US

OFFICERS AND DIRECTORS:

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

Electronic Signature of Registered A

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: SD (X) Change () Addition

Name: MARINELLI, PAUL Name: FERGUSON, HOWELL

Address: 2600 GOLDEN GATE PKWY., SUITE 200 Address: 400 N. TAMPA ST., SUITE 2200

City-St-Zip: NAPLES, FL 339423206 City-St-Zip: TAMPA, FL 33602

Title: SD () Delete Title: D (X) Change () Addition

Name: UNDERBRIN, ROBERT Name: UNDERBRINK, ROBERT

Address: P.O BOX 1210 Address: P.O BOX 1210

City-St-Zip: BELLE GLADE, FL 33430 City-St-Zip: BELLE GLADE, FL 33430

Title: TD () Delete Title: () Change () Addition Name: THOMAS, ROBERT Name:

 Address:
 40 RANCH ROAD
 Address:

 City-St-Zip:
 THONOTOSASSA, FL 33592
 City-St-Zip:

Title: VC () Delete Title: D (X) Change () Addition

 Name:
 LESTER, BERNIE
 Name:
 LESTER, BERNIE

 Address:
 P.O BOX 338
 Address:
 P.O BOX 338

 City-St-Zip:
 LABELLE, FL 33935
 City-St-Zip:
 LABELLE, FL 33935

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: BERNIE LESTER D 01/15/2004