2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08549

FILED May 03, 2005 Secretary of State

Entity Name: FLORIDA LAND COUNCIL, INC.

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 ()

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:

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

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 FERGUSON, HOWELL
 Name:
 FERGUSON, HOWELL

Address: 400 N. TAMPA ST., SUITE 2200 Address: 400 N. TAMPA ST., SUITE 2200

City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602 US

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

Name: UNDERBRINK, 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 US

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

Address: 40 RANCH ROAD Address: 40 RANCH ROAD

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

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

Name: LESTER, BERNIE Name: COKER, ROBERT

 Address:
 P.O BOX 338
 Address:
 111 PONCE DELEON AVENUE

 City-St-Zip:
 LABELLE, FL 33935
 City-St-Zip:
 CLEWISTON, FL 33440 US

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: ROBERT UNDERBRINK D 05/03/2005