

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08549

FILED
Apr 18, 2006
Secretary of State

Entity Name: FLORIDA LAND COUNCIL, INC.

Current Principal Place of Business:

310 W. COLLEGE AVE.
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

310 W. COLLEGE AVE.
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-2607230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITTLEJOHN, CHARLES B
310 WEST COLLEGE AVENUE
TALLAHASSEE, FL 32301 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: FERGUSON, HOWELL
Address: 400 N. TAMPA ST., SUITE 2200
City-St-Zip: TAMPA, FL 33602 US

Title: D () Delete
Name: UNDERBRINK, ROBERT
Address: P.O BOX 1210
City-St-Zip: BELLE GLADE, FL 33430 US

Title: TD () Delete
Name: THOMAS, ROBERT
Address: 40 RANCH ROAD
City-St-Zip: THONOTOSASSA, FL 33592 US

Title: SD () Delete
Name: COKER, ROBERT
Address: 111 PONCE DELEON AVENUE
City-St-Zip: CLEWISTON, FL 33440 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/C (X) Change () Addition
Name: UNDERBRINK, ROBERT
Address: P.O. BOX 1210
City-St-Zip: BELLE GLADE, FL 33430 US

Title: D (X) Change () Addition
Name: ALEXANDER, JOHN R
Address: P.O. BOX 338
City-St-Zip: LABELLE, FL 33975 US

Title: D/S (X) Change () Addition
Name: COKER, ROBERT
Address: 111 PONCE DELEON AVENUE
City-St-Zip: CLEWISTON, FL 33440 US

Title: D/T (X) Change () Addition
Name: LYKES, CHARLIE JR.
Address: 106 SW COUNTY ROAD 721
City-St-Zip: OKEECHOBEE, FL 34974 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT UNDERBRINK

D/C

04/18/2006

Electronic Signature of Signing Officer or Director

Date