

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08549

FILED
Mar 02, 2009
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/C () Delete
Name: UNDERBRINK, ROBERT
Address: P.O. BOX 1210
City-St-Zip: BELLE GLADE, FL 33430 US

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: LYKES, CHARLIE
Address: 106 SW CR 721
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: SEC (X) Change () Addition
Name: DUDA-CHAPMAN, TRACY
Address: PO BOX 620257
City-St-Zip: OVIEDO, FL 32765 US

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: CHARLES B. LITTLEJOHN

MR.

03/02/2009

Electronic Signature of Signing Officer or Director

Date