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Feb 03 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N27632 (1)

1. Corporation Name

RETIRED OFFICERS' LAND CORPORATION



Principal Place of Business

Mailing Address

1010 AMERICAN EAGLE BLVD
BOX 352 4TH FLOOR
SUN CITY CENTER FL 33573
US1010 AMERICAN EAGLE BLVD
BOX 352 4TH FLOOR
SUN CITY CENTER FL 33573-5284
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREZAFFI, JOSEPH
1010 AMERICAN EAGLE BLVD., #227
SUN CITY CENTER FL 33573

81 Name

CHARLES M. EAST JR.

82 Street Address (P.O. Box Number is Not Acceptable)

1010 AMERICAN EAGLE BLVD., #239

83

84 City

SUN CITY CENTER

FL

85

Zip Code

33573

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CPD	<input checked="" type="checkbox"/> DELETE
NAME	GREZAFFI, JOSEPH	
STREET ADDRESS	1010 AMERICAN EAGLE BLVD #227	
CITY-ST-ZIP	SUN CITY CENTER FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	LLOYD, LUTHER R.	
STREET ADDRESS	15209 LAKE MAURINE DR.	
CITY-ST-ZIP	ODESSA FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	GARTEN, MELVIN	
STREET ADDRESS	60 MARTINIQUE AVENUE	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GARBETT, JOHN S	
STREET ADDRESS	1010 AMERICAN EAGLE BLVD #350	
CITY-ST-ZIP	SUN CITY CENTER FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, PETER R.	
STREET ADDRESS	11180 6TH STREET EAST	
CITY-ST-ZIP	TREASURE ISLAND FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	CHARLES M. EAST JR.	
1.3 STREET ADDRESS	1010 AMERICAN EAGLE BLVD., #239	
1.4 CITY-ST-ZIP	SUN CITY CENTER, FL 33573	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	CD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	EARL G. PECK	
6.3 STREET ADDRESS	1466 74th CIRCLE NE	
6.4 CITY-ST-ZIP	ST. PETERSBURG, FL 33702	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

CHARLES M. EAST JR. President Jan 24, 1997 813/633-4467

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0046480

CR2E037 (9/96)