## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Jan 22, 2008 8:00 am **Secretary of State DOCUMENT # N41730** 01-22-2008 90040 037 \*\*\*\*61.25 LOCAL 666 I.A.T.S.E. LAND CORP. Principal Place of Business Mailing Address 7463 CONROY-WINDERMERE RD. 7463 CONROY-WINDERMERE RD. SUITE A BLDG A SUITE A BLDG A ORLANDO, FL 32835-2761 ORLANDO, FL 32835-2761 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 7463 Conrol-Windermere Rd 7463 Conrol-Windermere R Suite, Apt. #, etc. 01042008 Chg-NP CR2E037 (12/06) <u>Suite A Buildina</u> Suite 4. FEI Number 95-0865897 City & State City & State Applied For orlando <u>Orlando</u> Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required usa 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent John Hilsman GIANNESCHI, LARRY MR. Street Address (P.O. Box Number is Not Acceptable) 7463 CONROY-WINDERMERE RD. SUITE A BLDG A ORLANDO, FL 32835-2761 Zip Code Orlando 8. The above named entity submits this statement by the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agend SIGNATUR ped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Fiffing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2008 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. D TITLE Delete TITLE M Addition GIANNESCHI, LARRY NAME NAME John Hilsman 7463 Conroy-Windermere Rd. Suite A 7463 CONROY RD #A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL CITY-ST-ZIP Orlando, PL 31835 Delete TITLE TITLE MILLER, FRANK st. Hilaire NAME NAME 1463 Conroy-Windermere Rd. Sui STREET ADDRESS 7463 CONROY RD #A STREET ADDRESS CITY-ST-ZIP ORLANDO, FL CITY-ST-ZIP TITLE ☐ Delete TITLE Russell Burrell NAME BURRELL, RUSSELL NAME 7463 Conroy-Windermere Rd. Suite A 7463 CONROY RD. #A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL CITY-ST-ZIP Orlando, FL 31835 TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CiTY-ST-2/P TITLE ☐ Delete TITLE ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

JOHN HILSMAN

changed, or on an attachment with an ad

SIGNATURE AND TYPED OR PRINTED NAME

SIGNATURE:

FILED