2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000062424

FILED Apr 22, 2009 Secretary of State

Entity Name: IOWA LAND AND GENERAL DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
54 N.E. FOURTH AVENUE DELRAY BEACH, FL 33483					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
54 N.E. FOURTH AVENUE DELRAY BEACH, FL 33483					
FEI Number: 41-6020439 FEI Number Applied For () FEI Number			FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
STRAWN, JOEL T 54 N.E. FOURTH AVENUE DELRAY BEACH, FL 33483 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	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () [KOCH, WILLIAM 900 E. ATLANTIC DELRAY BEACH	CAVE., SUITE 14	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () [KOCH, WILLIAM 900 E. ATLANTIC DELRAY BEACH	CAVE., SUITE 14	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV ()E STRAWN, JOEL 54 N.E. FOURTH DELRAY BEACH	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () [GWYNN, WILLIA 214 N.E. FOURTI DELRAY BEACH	H STREET	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	D () [STROYAN, COLI SEVEN ROTHES EDINBRUGH, SO	AY TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ()[LAWSON, PETEI IVERSEK HOUSI LONDON, ENGL/	E 1 ALDWYCH	Title: Name: Address: City-St-Zip:	() Change() Addition	
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 607, Florida Statutes; and that my name appears					

SIGNATURE: WILLIAM E. GWYNN STD 04/22/2009

above, or on an attachment with an address, with all other like empowered.