2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) CUMENT # P00000071564 **DOCUMENT #**

1. Entity Name



FILED Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90354 010 ***150.00

LAND PL	LUS REALTY, INC.						01 13 2003 3033 1	310 130	7.00	
Principal Place 2691 A BRANNAPLES FL C		Mailing Address 2691 A BRANTLEY BLVD NAPLES FL 34117								
2. Principal I	Place of Business	3. Mailing Address				\dashv		il 1 500 1 11 56 1 0111		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				-				
00.00						CHECK HERE IF MAKING CHANGES				
City & Sta	te	City & State			4	4. FEI Number 59-2489567	 	Applied For Not Applicable		
Zip	Country	Zip		Coun	try	5	5. Certificate of Status Desired	\$8.75 Ac	dditional	
	6. Name and Address of Curren	t Registere	ed Agent			7.	7. Name and Address of New Registered	Fee Require	ed	
НИИСИ	ROBERT T		Name							
•	RANTLEY BLVD		;			Street Address (P.O. Box Number is Not Acceptable)				
NAPLES I										
					City		F	■ Zip Coo	de	
8. The above	e named entity submits this statement f	or the purp	ose of changing its	registere	d office or regis	stered a	agent, or both, in the State of Florida. I an	L		
the obligat	tions of registered agent.	,							, =	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if and	ficable (NOT)	F: Registered	Agent signature requ	irad who	n colortation)			
	ILE NOW!!! FEE IS \$150.00					med when	en reinstating) DATE			
[€] After Make Check	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of	of State		•			Election Campaign Financing Trust Fund Contribution.		00 May Be od to Fees	
10.	OFFICERS AND	DIRECTO		11.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	IS IN 11	
TITLE NAME STREET ADDRESS	UHLICH, ROBERT T 2691 A BRANTLEY BLVD		☐ Delete	NAME STREE	T ADDRESS			☐ Change	☐ Addition	
CITY-ST-ZIP	NAPLES FL 34117				ST-ZIP					
TITLE NAME	·		☐ Delete	TITLE				☐ Change	Addition	
STREET ADDRESS				NAME STREE	T ADDRESS					
CITY-ST-ZIP			·· .	CITY-	ST-ZIP					
TITLE NAME			☐ Delete	TITLE				☐ Change	Addition	
STREET ADDRESS			سيد يد	NAME STREE	T ADDRESS	، - ـــ	and the second s			
CITY-ST-ZIP				CITY-:	ST-ZIP					
TITLE NAME			☐ Delete	TITLE NAME				Change	☐ Addition	
STREET ADDRESS					T ADDRESS					
CITY-ST-ZIP				CITY-S	ST-ZIP					
TITLE NAME			☐ Delete	TITLE			•	☐ Change	Addition	
STREET ADDRESS				NAME	ADDRESS					
CITY-ST-ZIP				CITY-S	į.					
TITLE	· · · · · · · · · · · · · · · · · · ·		☐ Delete	TITLE	İ		<u> </u>	☐ Change	Addition	
NAME Street address				NAME	ADDDECC					
CITY-ST-ZIP				CITY-S	ADDRESS T-ZIP					
12. I hereby c	ertify that the information supplied with	this filing o	does not qualify for	the exem	ption stated in S	Section	n 119.07(3)(i), Florida Statutes. I further ce	ertify that the in	nformation	

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

1-8-03

Daytime Phone #