2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000080668

1. Entity Name TJC LAND, INC.



FILED Apr 16, 2007 08:00 Al Secretary of State

Principal Place of Business

1717 EAST FOWLER AVENUE TAMPA, FL 33612 Mailing Address

1717 EAST FOWLER AVENUE TAMPA, FL 33612



DO NOT WRITE IN THIS SPACE

04112007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

55-0823150 Not Applicable

5. Certificate of Status Desired See Required

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CROWDER, WILLIAM C 1717 EAST FOWLER AVENUE TAMPA, FL 33612

DO NOT WRITE IN THIS SPACE

4-12-07

813-971-1040

	named entity submits this statement for the plons of registered agent.	urpose of changing its registered	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and trite li	applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			ing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COUCH, THEODORE J 1717 EAST FOWLER AVENUE TAMPA, FL 33612		•	. •	U00000709648 04/25/07-80012-010 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD CROWDER, WILLIAM C 1717 EAST FOWLER AVENUE TAMPA, FL 33612				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COUCH, MARTHA K 1717 E FOWLER AVER TAMPA, FL 33612		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COUCH, THEODORE J JR 1717 E FOWLER AVE TAMPA, FL 33612			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS 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 eath; 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.					

RINTED NAME OF SIGNING OFFICER OR DIRECTOR