

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000091432

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: T & L INVESTMENT DEVELOPERS, INC.

Current Principal Place of Business:

216 MOUNTAIN DR
DESTIN, FL 32541

New Principal Place of Business:

216 MOUNTAIN DR
UNIT #100
DESTIN, FL 32541

Current Mailing Address:

P O BOX 5648
DESTIN, FL 32540

New Mailing Address:

FEI Number: 90-0000625

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, TIMOTHY L
216 MOUNTAIN DR
DESTIN, FL 32541

Name and Address of New Registered Agent:

HENDERSON, TIMOTHY L
216 MOUNTAIN DR
UNIT #100
DESTIN, FL 32541

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: TIMOTHY L. HENDERSON

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HENDERSON, TIMOTHY L
Address: 216 MOUNTAIN DR
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: HENDERSON, MICHAEL L
Address: 216 MOUNTAIN DR
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HENDERSON, TIMOTHY L
Address: 216 MOUNTAIN DR - UNIT #100
City-St-Zip: DESTIN, FL 32541

Title: D (X) Change () Addition
Name: HENDERSON, MICHAEL L
Address: 216 MOUNTAIN DR - UNIT #100
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY L. HENDERSON

PRES

04/30/2002

Electronic Signature of Signing Officer or Director

Date