


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2007 8:00 am**  
**Secretary of State**

04-26-2007 90206 008 \*\*\*150.00

DOCUMENT # P02000009397			
1. Entity Name GW LAND HOLDING, INC.			
Principal Place of Business 120 NE 4TH STREET FORT LAUDERDALE, FL 33301		Mailing Address 120 NE 4TH STREET FORT LAUDERDALE, FL 33301	
2. Principal Place of Business - No P.O. Box # 1212 E. Broward Blvd. Suite 300		3. Mailing Address 1212 E Broward Blvd. Suite 300	
City & State Ft. Lauderdale, FL		City & State Ft. Lauderdale, FL	
Zip 33301		Zip 33301	
County Broward		County Broward	
4. FEI Number 59-2338379		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RICHARDSON, GEX F 120 NE 4TH STREET FORT LAUDERDALE, FL 33301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.		SIGNATURE _____ DATE _____	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P WRIGHT, GLENN JR 120 NE 4TH STREET FORT LAUDERDALE, FL 33301 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1212 E. Broward Blvd. Ft. Lauderdale, FL 33301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V WRIGHT, PATRICIA K 120 NE 4TH STREET FORT LAUDERDALE, FL 33301 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1212 E. Broward Blvd. Ft. Lauderdale, FL 33301
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: _____		Date _____ Daytime Phone # _____	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



01082007 Chg-P CR2E034 (12/06)