2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000042742

1. Entity Name

MADÍSON LAND AND DEVELOPMENT CORP. INC.



FILED Mar 17, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

3851 INDIAN TRAIL DESTIN, FL 32541 310 HOLLY STREET DESTIN, FL 32541



DO NOT WRITE IN THIS SPACE

03142000		G1422004 (11700)			
4. FEI Number			Applied For		
46-0482	337		Not Applicable		

5. Certificate of Status Desired

No Cha-P

02142008

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

MCGILL, ROBERT E III 36008 EMERALD COAST PKWY., STE. 301 DESTIN, FL 32541

DO NOT WRITE IN THIS SPACE

				,				
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								
		Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000862132 04/03/08-80037-006	150.00		
10.	OFFICERS AND DIREC	TORS			•			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TENORE, TONY 310 HOLLY STREET DESTIN, FL 32541							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TENORE, RHONDA 310 HOLLY STREET DESTIN, FL 32541				,			
TITLE NAME STREET ADDRESS CETY+ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-21P								

12. I hereby certify that the information supplied with this filling 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 of trustee empowers 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-08

850 -424-6022

Daytime Phone A