

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000135582

FILED
Feb 16, 2006
Secretary of State

Entity Name: SPRINGLAND INVESTMENTS, INC.

Current Principal Place of Business:

6383 NW 62ND TERRACE
PARKLAND, FL 33067

New Principal Place of Business:

Current Mailing Address:

6383 NW 62ND TERRACE
PARKLAND, FL 33067

New Mailing Address:

FEI Number: 81-0589257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKARIA, PAUL
6383 NW 62ND TERRACE
PARKLAND, FL 33067 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SKARIA, PAUL
Address: 6383 NW 62ND TERRACE
City-St-Zip: PARKLAND, FL 33067

Title: VD () Delete
Name: THEKKUMKATTILL, JOSE
Address: 6014 NW 725TH WAY
City-St-Zip: PARKLAND, FL 33067

Title: SD () Delete
Name: NADAYIL, AUGUSTINE
Address: 6885 NW 57TH CT
City-St-Zip: CORAL SPRINGS, FL 33067

Title: TD () Delete
Name: VATHIELIL, JAMES
Address: 6309 NW 74TH TERRACE
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: PAUL SKARIA

PD

02/16/2006

Electronic Signature of Signing Officer or Director

Date