

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014145

FILED  
Apr 29, 2007  
Secretary of State

Entity Name: LAND TRUST MANAGEMENT CORPORATION

## Current Principal Place of Business:

219 EAST HARDING STREET  
ORLANDO, FL 32806

## New Principal Place of Business:

289 SPRING STREET  
COCOA, FL 32927

## Current Mailing Address:

PO BOX 590402  
ORLANDO, FL 32859

## New Mailing Address:

289 SPRING STREET  
COCOA, FL 32927

FEI Number: 81-0595354

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STURTEVANT, RICK D  
219 EAST HARDING STREET  
ORLANDO, FL 32806 US

## Name and Address of New Registered Agent:

STURTEVANT, RICK D  
289 SPRING STREET  
COCOA, FL 32927 US

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: RICK D STURTEVANT

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: STURTEVANT, RICK D  
Address: 219 EAST HARDING STREET  
City-St-Zip: ORLANDO, FL 32806

Title: VPD ( ) Delete  
Name: STURTEVANT, LISA K  
Address: 219 EAST HARDING STREET  
City-St-Zip: ORLANDO, FL 32806

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: STURTEVANT, RICK D  
Address: 289 SPRING STREET  
City-St-Zip: COCOA, FL 32927

Title: VPD (X) Change ( ) Addition  
Name: STURTEVANT, LISA K  
Address: 289 SPRING STREET  
City-St-Zip: COCOA, FL 32927

I hereby certify that the information supplied with this filing does not qualify 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: RICK D STURTEVANT

PD

04/29/2007

Electronic Signature of Signing Officer or Director

Date