

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000032765

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: NEW LAND DEVELOPERS, INC.

## Current Principal Place of Business:

3990 SW LAFFITE ST  
PORT ST LUCIE, FL 34953

## New Principal Place of Business:

1302 SW BABCOCK AVE  
PORT ST LUCIE, FL 34953

## Current Mailing Address:

3990 SW LAFFITE ST  
PORT ST LUCIE, FL 34953

## New Mailing Address:

1302 SW BABCOCK AVE  
PORT ST LUCIE, FL 34953

FEI Number: 14-1857144

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CEPERO, JOSE R  
3990 SW LAFFITE ST  
PORT ST LUCIE, FL 34953

## Name and Address of New Registered Agent:

CEPERO, JOSE R  
1302 SW BABCOCK AVE  
PORT ST LUCIE, FL 34953

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:

01/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: CEPERO, JOSE R  
Address: 3990 SW LAFFITE ST  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: DVS ( ) Delete  
Name: CEPERO, ROBERTO A  
Address: 3990 SW LAFFITE ST  
City-St-Zip: PORT ST LUCIE, FL 34953

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: CEPERO, JOSE R  
Address: 1302 SW BABCOCK AVE  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: DVS (X) Change ( ) Addition  
Name: CEPERO, ROBERTO A  
Address: 1302 SW BABCOCK AVE  
City-St-Zip: PORT ST LUCIE, FL 34953

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: JOSE R. CEPERO

DPT

01/06/2004

Electronic Signature of Signing Officer or Director

Date