2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2005 08:00 AM Secretary of State

	ANNUAL	Secretary of State					
DOCUMENT # P03000058675 1. Entity Name BREVARD COUNTY LAND CO., INC.						ecretary	y of Stat
	ce of Business NCREEK AVENUE 'L 32803	Mailing Address 301 N. FERNCREEK AVENUE SUITE A ORLANDO, FL 32803					
E	OO NOT WRITE		CE	03112005 4. FEI Numb 06-169	No Chg-P	CR2E034 (1	
	6. Name and Address of Current	Registered Agent	,.			•	
301 N. FÉI SUITE A	CHARLES K RNCREEK AVENUE D, FL 32803	-	•	NOT W			
	named entity submits this statement fi tions of registered agent.	or the purpose of changing its register	ed office or registe	red agent, or bo	oth, in the State of Fl	orida. I am familia	r with, and accept
SIGNATURE.	Signature, typed or printed name of registered agen	and title if applicable. (NOTE, Registers	od. Agent signature require	d when reinstating)	<u> </u>	# -9 -0 DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.	9. Election Campaign Fina Trust Fund Contribution.		.00 May Be led to Fees			
10.	OFFICERS AND	DIRECTORS,		·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GILLIAM, CHARLES K 301 N. FERNCREEK AVE, SUIT ORLANDO, FL 32803	EA			13000 0471470	100305960 15-80106-0	14 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4-14-1-					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	_NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			AND ACCUPANT OF THE PARK AND TH	IN '	THIS SI	PACE	. (
TITLE NAME STREET ADDRESS CITY-ST-ZIP						· · · · · · · · · · · · · · · · · · ·	····
TITLE NAME STREET ADDRESS							

12. I hereby certify that the information supplied with this filling does not qualify 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 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 AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR