

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018549

FILED
Jan 27, 2005
Secretary of State

Entity Name: SOUTHERN LAND DEVELOPMENT ENTERPRISES, INC.

Current Principal Place of Business:

710 WILLIAMS AVE
LEHIGH ACRES, FL 33936

New Principal Place of Business:

710 WILLIAMS AVE
LEHIGH ACRES, FL 33936 US

Current Mailing Address:

710 WILLIAMS AVE
LEHIGH ACRES, FL 33936

New Mailing Address:

710 WILLIAMS AVE
LEHIGH ACRES, FL 33936 US

FEI Number: 20-0724521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWERS, ROBERT L
23 COLORADO ROAD
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

FARRAR, MARGARET
710 WILLIAMS AVE
LEHIGH ACRES, FL 33936 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: MARGARET FARRAR

01/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FARRAR, MICHAEL
Address: 710 WILLIAMS AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VD () Delete
Name: FARRAR, MARGARET
Address: 710 WILLIAMS AVE
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MICHAEL FARRAR

PD

01/27/2005

Electronic Signature of Signing Officer or Director

Date