2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P04000024354 FILED L & R LAND DEVELOPMENT, INC. 07 FEB - 1 PM 2: 38 Frincipal Place of Business Mailing Address SECRETARY OF STATE 52 SCHOOL RD P.O. BOX 859 TALLAHASSEE, FLORIDA EASTPOINT, FL 32328 EASTPOINT, FL 32328 02012007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0718648 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RICHARDS, RANDY G DO NOT WRITE 52 SCHOOL RD EASTPOINT, FL 32328 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, M (NOTE Registered Agent Biograture required when reinstating) DATE \$5.00 May 9 8 0 0 0 0 8 7 2 7 0 9 8 Added to File / 19 / 07 - 0 1 0 3 9 - - 0 0 4 ** 1 5 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME RICHARDS, RANDY G STREET ADDRESS P O BOX 859, 52 SCHOOL RD EASTPOINT, FL 32328 CITY-ST-ZIP TITLE RICHARDS, LINDA B NAME P O BOX 859, 52 SCHOOL RD STREET ADDRESS EASTPOINT, FL 32328 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 exemptions contained 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 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: OFFICER OR DIRECTOR

CITY-ST-ZIP

Date

Daytime Phone #