

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2005 8:00 am
Secretary of State

02-03-2005 90043 036 ***158.75

DOCUMENT # P04000051836 1. Entity Name ABL LAND SERVICES, INC.			
Principal Place of Business 7314 WOODKNOT CT ORLANDO, FL 32835		Mailing Address 7314 WOODKNOT CT ORLANDO, FL 32835	
2. Principal Place of Business 7314 Woodknot Ct Suite, Apt. #, etc. 1		3. Mailing Address Same Suite, Apt. #, etc.	
City & State Orlando, FL Zip 32835		City & State Orlando, FL Zip 32835	
4. FEI Number 55-0862333		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HALL-RUSSELL L 7314 WOODKNOT CT ORLANDO, FL 32835		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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: <u><i>Russell L Hall</i></u> DATE: <u>1-25-05</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE President NAME Russell L Hall STREET ADDRESS 7314 Woodknot Ct CITY-ST-ZIP Orlando, FL 32835	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE Vice President NAME Richard C Hall STREET ADDRESS 7314 Woodknot Ct CITY-ST-ZIP Orlando, FL 32835	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: <u><i>Russell L Hall</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>1-25-05</u> Daytime Phone #	