


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000063818		
1. Entity Name LIBERTY LAND & DEVELOPMENT ASSOCIATES, INC.		

Principal Place of Business 7062 BERACASA WAY BOCA RATON, FL 33433 US	Mailing Address 7062 BERACASA WAY BOCA RATON, FL 33433 US
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05 NOV 28 AM 11:28
REINSTATEMENT
T. Roberts NOV 27 2005

2. Principal Place of Business 8409 N. Military Trail Suite, Apt. #, etc. #115 City & State PALM BEACH GARDENS, FL Zip 33410 Country USA	3. Mailing Address 8409 N. Military Trail Suite, Apt. #, etc. #115 City & State PALM BEACH GARDENS, FL Zip 33410 Country USA
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11212005 REIN-P CR2E098 (6/04)

6. Name and Address of Current Registered Agent KLEIN, DAVID L 7062 BERACASA WAY BOCA RATON, FL 33433	
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7. Name and Address of New Registered Agent Name DAVID L. KLEIN Street Address (P.O. Box Number is Not Acceptable) 8409 N. Military Trail #115 City & State PALM BEACH GARDENS FL Zip 33410	
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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 <i>David L. Klein</i>	DAVID L. KLEIN	11/21/2005 (703) 703-1070

- Check # 2068 - FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KLEIN, DAVID L 7062 BERACASA WAY BOCA RATON, FL 33433	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARINO, ANTHONY P 7062 BERACASA WAY BOCA RATON, FL 33433	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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)(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: <i>David L. Klein</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	11/21/2005 (561) 703-1070 Date Daytime Phone #

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TALLAHASSEE, FLORIDA