## 2007 FOR PROFIT CORPORATION

## Jan 22, 2007 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P04000157013** 01-22-2007 90082 015 \*\*\*150 00 FAMILY LANDS REMEMBERED, INC. Mailing Address Principal Place of Business 40003459 7128 SE RIVERS EDGE ROAD 7128 SE RIVERS EDGE ROAD JUPITER, FL 33458 JUPITER, FL 33458 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01152007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 20-1927720 Not Applicable Zip Country Zip Country \$8:75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VERGARA, CARLOS M Street Address (P.O. Box Number is Not Acceptable) 7128 SE RIVERS EDGE ROAD JUPITER, FL 33458 City 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change ☐ Addition TITLE Delete TITLE TOME LENRIQUE A NAME NAME 1000 SOUTHERN BLVD #300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33405 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PRESCOTT, WARREN L NAME NAME 51 RIVER DRIVE STREET ADDRESS STREET ADDRESS JUPITER, FL 33469 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME VERGARA, CARLOS M NAME STREET ADDRESS 7128 SE RIVERS EDGE RD STREET ADORESS CITY-ST-21P JUPITER FL 33458 CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change Addition Cox ERNEST NAME NAME STREET ADDRESS STREET ADDRESS 138 SANTIAGO CITY-ST-ZIP CITY-ST-ZIP TUPITER FI 33458 TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

**FILED** 

12. I hereby certify that the information supplied with this filing 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR