

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000005943

1. Entity Name
I - LAND INVESTMENTS, INC.



**FILED
Aug 27, 2007 8:00 am
Secretary of State**

05-14-2007 90073 044 ***150.00

05/14/07 90073 044 \$150.00



08022007 Chg-P CR2E034 (12/06)

4. FEI Number 20-2145902	Applied For
	Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BRAINARD, LANIE LEI
4240 ALEXANDER AVE
GULF BREEZE, FL 32563

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!! FEE IS \$550.00
Due by September 14, 2007**

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 NAME STREET ADDRESS CITY-ST-ZIP	P BRAINARD, LANIE L 4240 ALEXANDER AVE GULF BREEZE, FL 32563	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

President 8/20/07 850-241-6879
Date Daytime Phone #

ATTACHMENT

66021456

I-LAND INVESTMENTS, INC.
7140 N. 9TH AVENUE
PENSACOLA, FL 32504

August 6, 2007

Florida Department of State
Division of Corporations

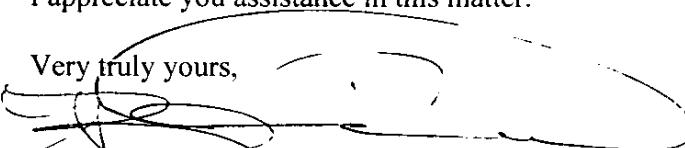
Dear Division Representative:

Enclosed is the signed 2007 Annual Report for I-Land Investments, Inc. (Document Number P05000005943). I filed this return originally before May 1, 2007, however I did not sign the return. Per my discussion with one of your representatives, a rejection letter was sent to my mailing address on May 25, 2007 asking for a signature on the report. The office that this letter went to is a large office with numerous real estate agents. This letter was never forwarded to me and I never received this letter.

I am asking that you waive the late fee and accept the \$150 payment that I mailed with the original return.

I appreciate you assistance in this matter.

Very truly yours,


Lanier Lee Brainard