

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000052390

Entity Name: METRO LAND MANAGEMENT, INC.

**FILED**  
**Jan 04, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

1155 CATHY TRIPP LANE  
JACKSONVILLE, FL 32220

## **New Principal Place of Business:**

8719 W. BEAVER STREET  
JACKSONVILLE, FL 32220

## **Current Mailing Address:**

1155 CATHY TRIPP LANE  
JACKSONVILLE, FL 32220

## **New Mailing Address:**

FEI Number: 20-2666175

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## **Name and Address of Current Registered Agent:**

CAPPS, EDWIN H  
1155 CATHY TRIPP LANE  
JACKSONVILLE, FL 32220 US

## **Name and Address of New Registered Agent:**

CAPPS, EDWIN H  
8719 W. BEAVER STREET  
JACKSONVILLE, FL 32220 US

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.

SIGNATURE:

01/04/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CAPPS, EDWIN H  
Address: 1155 CATHY TRIPP LANE  
City-St-Zip: JACKSONVILLE, FL 32220

Title: SEC  
Name: CAPPS, STACEY  
Address: 1155 CATHY TRIPP LANE  
City-St-Zip: JACKSONVILLE, FL 32220

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: EDWIN CAPPS

PRES

01/04/2010

Electronic Signature of Signing Officer or Director

Date