

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000058592

FILED
Apr 23, 2009
Secretary of State

Entity Name: AMERICAN LAND DEVELOPERS, INC.

Current Principal Place of Business:

1803 PARK CENTER DRIVE
SUITE 215
ORLANDO, FL 32835 US

New Principal Place of Business:

1575 MAGUIRE ROAD
SUITE 102
OCOOEE FLORIDA, FL 34786 US

Current Mailing Address:

1803 PARK CENTER DRIVE
SUITE 215
ORLANDO, FL 32835 US

New Mailing Address:

1575 MAGUIRE ROAD
SUITE 102
OCOOEE FLORIDA, FL 34786 US

FEI Number: 38-3720301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORADI, SHAMAN
11318 WINSTON WILLOW COURT
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: FORADI, SHAMAN
Address: 11318 WINSTON WILLOW COURT
City-St-Zip: WINDERMERE, FL 34786 US

Title: P (X) Delete
Name: LEMASTER, SARA M
Address: 1383 WATERSTON DR.
City-St-Zip: EVANS, GA 30809

Title: VP () Delete
Name: FORADI, MEHRAFROUZ
Address: 11318 WINSTON WILLOW COURT
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FORADI, SHAMAN
Address: 11318 WINSTON WILLOW COURT
City-St-Zip: WINDERMERE, FL 34786 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SHAMAN FORADI

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date