2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secretary of State 03-26-2007 90065 014 ***150.00 **DOCUMENT #P14409** THE CHOBEE LAND ENTERPRISES COMPANY 411141313 Principal Place of Business Mailing Address 8550 OKEECHOBEE RD 102 N WESTGATE FORT PIERCE, FL 34945 JACKSONVILLE, IL 62650 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02162007 Chg-P CR2E034 (12/06) City & State 4. FEI Number Applied For City & State 31-1205183 Not Applicable 7in 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MEAD, RUTH C Street Address (P.O. Box Number is Not Acceptable) 216 S BCH RD HOBE SOUND, FL 33455 City Zip Code FL 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 harne of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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. П Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Addition TITLE Change TITLE ☐ Delete NAME MEAD, RUTH C. NAME MEAD, RUTH C. STREET ADDRESS 216 SOUTH BEACH RD STREET ADDRESS 216 SOUTH BEACH RD CITY-ST-ZIP CITY-ST-ZIP HOBE SOUND, FL. HOBE SOUND, FL 33455 D ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME BARKER, RUTH M. NAME 126 WEST FIELD ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEDHAM, MA 02026 X Change ☐ Delete TITLE ☐ Addition TITLE PRYOR, EMILIE M PRYOR, EMILIE M NAME NAME STREET ADDRESS 15 REXFORD ROAD STREET ADDRESS 15 REXFORD ROAD CITY-ST-ZIP WEST CORNWALL, CT CITY-ST-7IP WEST CORNWALL, CT 06796 ☐ Change ☐ Delete TITLE ☐ Addition TITLE MEAD, DEXTER C. NAME NAME MEAD, DEXTER C. STREET ADDRESS STREET ADDRESS 650 MINE RIDGE RD 1 HIGH POINT LANE CITY-ST-ZIP GREAT FALLS, VA CITY-ST-ZIP DARTMOUTH, MA 02748 ☐ Change ☐ Addition TITLE Delete TITLE MEAD, NELSON S., JR. NAME NAME STREET ADDRESS 210 GILMAN ROAD STREET ADDRESS YARMOUTH, ME 04096 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

FILED Mar 26, 2007 8:00 am

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 eath; 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.

CITY-ST-ZIP

RUTH C. MEAD, PRESIDENT 2/28/07 (217)243-4397TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CITY-ST-ZIP