FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 31 PM 8:41

DOCUMENT # P92000001568 (4)

1. Corporation Name

JTB LAND DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
~~C/O CORO INVESTMENTS, INC.~~ ~~8221 OLD COURTHOUSE ROAD, SUITE 204~~ ~~VIENNA VA 22182~~	~~C/O CORO INVESTMENTS, INC.~~ ~~8221 OLD COURTHOUSE ROAD, SUITE 204~~ ~~VIENNA VA 22182~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/03/1992
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21	26 6900 Southpoint DR
22 Suite, Apt. #, etc. 6900 Southpoint DR. ~~Ste. 430~~	27 Suite, Apt. #, etc. Suite 430
23 City & State Jacksonville, FL	28 City & State Jacksonville FL
24 Zip 32216 25 Country Duval	29 Zip 32216 30 Country Duval

4. FEI Number: 59-3149098 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SANKERS, GUS 6900 SOUTHPOINT DRIVE ~~SUITE 230~~ JACKSONVILLE FL 32216	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Suite 430 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
(If changing registered agent, registered agent must sign above. DATE: Registered Agent signature required when mandatory.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☐ Change ☐ Addition
NAME	FRANSEN, VICTOR R	12 NAME	
STREET ADDRESS	8221 OLD COURTHOUSE ROAD, SUITE 204	13 STREET ADDRESS	
CITY ST ZIP	VIENNA VA	14 CITY ST ZIP	
TITLE	DVP	21 TITLE	☐ Change ☐ Addition
NAME	PRENTICE, BRYANT H	22 NAME	
STREET ADDRESS	8221 OLD COURTHOUSE ROAD, SUITE 204	23 STREET ADDRESS	
CITY ST ZIP	VIENNA VA	24 CITY ST ZIP	
TITLE	VPST	31 TITLE	☐ Change ☐ Addition
NAME	HUTCHINSON, MARC C.	32 NAME	
STREET ADDRESS	8221 OLD COURTHOUSE ROAD, SUITE 204	33 STREET ADDRESS	
CITY ST ZIP	VIENNA VA	34 CITY ST ZIP	
TITLE	VP	41 TITLE	☐ Change ☐ Addition
NAME	SANKERS, GUS	42 NAME	
STREET ADDRESS	6900 SOUTHPOINT DRIVE, NORTH #230	43 STREET ADDRESS	
CITY ST ZIP	JACKSONVILLE FL	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, again attachment with an address.

SIGNATURE: Marc C. Hutchinson
Marc C. Hutchinson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 18, 1995 (Date) 703-506-1006 (Daytime Phone)

0307044 FP