## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P94000031519**

1. Entity Name

2014 LAND HOLDINGS INCORPORATED



FILED Feb 11, 2008 08:00 AN Secretary of State

Fee Required

Principal Place of Business 1301 6TH AVE W SUITE 600 BRADENTON, FL 34205 Mailing Address POB 597

BRADENTON, FL 34206



 
 02022008
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 65-0486750
 Applied For Not Applicable

 5. Certificate of Status Desired
 \$8.75 Additional

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

MILLER, ROBERT L CPA 1301 6TH AVE W STE 600 BRADENTON, FL 34205

## DO NOT WRITE IN THIS SPACE

				•	
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered office or	registered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title it	f applicable. (NOTE: Registered Agent signal	ire required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWN, DIANE 628 TREMONT STREET SARASOTA, FL			H00000001 000	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SEAMAN, DONALD 1511 RIDGEWOOD LANE SARASOTA, FL			U00000821633 02/19/08-30037-011 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAVIS, LINDA 1755 STANFORD LANE SARASOTA, FL		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SEAMAN, DAVID C 2401 CARDWELL WAY SARASOTA, FL		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				in the second se	
12. I hereby	certify that the information supplied with this fi	illing does not qualify for the exemptions of	ontained in Chapter 1	19, Florida Statutes. I further certify that the information	

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 aport 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 it his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 11 chapter 12 chapter 12 chapter 13 chapter 14 chapter 14 chapter 15 chapter 15 chapter 15 chapter 15 chapter 15 chapter 16 chapter 16 chapter 17 chapter 17 chapter 18 chapter 18 chapter 19 chap

SIGNATURE:

ME OF SIGNING OFFICER OR DIRECTOR

2/8/08 941-747-4483