2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000050181

Entity Name: BMJ LAND COMPANY

FILED Feb 17, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8451 MCALLISTER WAY WEST PALM BEACH, FL 33411 **Current Mailing Address: New Mailing Address:** 8451 MCALLISTER WAY WEST PALM BEACH, FL 33411 FEI Number: 65-0510815 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEMARCO, ROBERT A 8451 MCALLISTER WAY WEST PALM BEACH, FL 33411 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

WELLINGTON, FL 33467

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

WELLINGTON, FL 33467

Title: () Delete Title: (X) Change () Addition TRIMBLE, JIM TRIMBLE, JIM Name: Name: 324 LAS PALMAS STREET 5664 OLD MYSTIC CT Address: Address: City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: JUPITER, FL 33458 Title: Title: () Delete (X) Change () Addition DEMARCO, ROBERT A Name: Name: DEMARCO, ROBERT A 14072 PADDOCK DRIVE 14072 PADDOCK DRIVE Address: Address: WEST PALM BEACH, FL 33414 WEST PALM BEACH, FL 33414 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: SONSINI, MICHAEL A Name: SONSINI, MICHAEL A Name: 4664 ISLAND REEF DRIVE 4664 ISLAND REEF DRIVE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: JIM TRIMBLE PRES 02/17/2005