2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State

							1 Secretary or State				
DOCUMENT # P94000058840 1. Entity Name LAND RESOURCE CAPITAL, INC.							04-28-2008	-			
Principal Place of Business Mailing Address							1 -				
8210 LAKEWOOD RANCH BLVD.			8210 LAKEWOOD RANCH BLVD.								
BRADENTON, FL 34202			BRADENTON, FL 34202				:: :				
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2. Principal Place of Business - No P.O. Box # 3			Mailing Address								
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Suite, Apt. #, etc.			Suite, Apt. #, etc.			1					
Salta, April 11, ala.			Sale, Apr. II, sta.			03102008	Chg-P	CR2E0	34 (12/06)		
City & State			City & State				4. FEI Numb			- I Ta	oplied For
Oity d State			Oily & State				65-051			 	ot Applicable
Zip Country		Zip		Country			03-03	2300			
Zip Country		Zip		Country			5. Certificate	of Status Desired		\$8.75 Add Fee Require	
·	6. Name and Address of Current	Popiet	arad Agast		<u></u>		7. Nome	A Address of Nove C			
	sted Agent		Name	7. Name and Address of New Registered Agent							
HEIM, PRISCILLA G					INDITIE						
1 '	EWOOD RANCH BLVD.			Street Address (P.O. Box Number is Not Acceptable)							
	ON, FL 34202						·	<u> </u>			
					Cinc					7:0:	
					City				FL	Zip Cod	e
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.											
1											
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent e-phature required when reinstating) DATE											
UNIC. registro or agricultural appropriation in appropriation of the second of the sec											
9. Election Campaign Fin						¢.	.00 May Be				
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			Trust Fund Contril				ed to Fees				
410011111	ay 1, 2000 1 cc will be \$550.										
10. OFFICERS AND DI			TORS	11,			ADDITIONS	/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11
TITLE	PTD		☐ Delete TIT							☐ Change	☐ Addition
NAME	SCHIER, JAMES R		NAM	NAME						_	
STREET ADDRESS	8210 LAKEWOOD RANCH BLVD.		STRE	STREET ADDRESS							
CITY-ST-ZIP				CITY-ST-ZIP							
TITLE	S Delete			TITLE	TITLE					☐ Change	☐ Addition
NAME	HEIM, PRISCILLA G		- Delete	Delete NAME						Change	ADDITION
STREET ADDRESS	i e		1	STREET ADDRESS							
CITY-ST-ZIP			CITY-ST								
	D. J. G. E. T. G. T. J. T. G.			-							
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CITY-\$1-ZIP				-	- ST- ZIP						
TITLE	l		Delete	TITLE	:					Change	noitibhA 🔲

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 oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute his 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.

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

☐ Delete

3/10/08

ale Daytime Phone #

☐ Change

□ Change

Addition

Addition