## 2004 FOR PROFIT CORPORATION

## May 05, 2004 8:00 am Secretary of State **ANNUAL REPORT** 05-05-2004 90247 014 \*\*\*150.00 DOCUMENT # P94000072450 1. Entity Name WAYTALL LAND CORPORATION, INC. Principal Place of Business Mailing Address 450 EAST LAS OLAS BLVD. 450 EAST LAS OLAS BLVD. **SUITE 1500 SUITE 1500** FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301 No Chg-P CR2E034 (10/03) 04212004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0530620 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. DO NOT WRITE 1 SE 3RD AVE 27TH FLOOR IN THIS SPACE MIAMI, FL 33131 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 name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE PSD HUIZENGA, H. WAYNE JR. NAME STREET ADDRESS 450 EAST LAS OLAS BLVD., 15 FLOOR FORT LAUDERDALE, FL 33301 CITY-ST-ZIP TITLE NAME HENNINGER, JR, ROBERT J STREET ADDRESS 450 EAST LAS OLAS BLVD., SUITE 1500 FORT LAUDERDALE, FL 33301 CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

BRANDEN, CRIS V

450 EAST LAS OLAS BLVD., 15 FLOOR

FORT LAUDERDALE, FL 33301

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