

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 09, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P95000030208

1. Entity Name

DOUGLAS LANDING DEVELOPMENT COMPANY, INC.



Principal Place of Business

24 JOANNA DRIVE  
SANTA ROSA BEACH FL 32459

Mailing Address

24 JOANNA DRIVE  
SANTA ROSA BEACH FL 32459



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

City & State

4. FEI Number 59-3307414

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VANN, EUGENE N  
24 JOANNA DRIVE

~~914~~  
SANTA ROSA BEACH FL 32459

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME VANN, MICHAEL L  
STREET ADDRESS 4201 CLIFF ROAD  
CITY - ST - ZIP BIRMINGHAM AL 35222

TITLE PD ☐ Delete  
NAME VANN, EUGENE N  
STREET ADDRESS 24 JOANNA DRIVE  
CITY - ST - ZIP SANTA ROSA BEACH FL 32459

TITLE 2VPD ☐ Delete  
NAME HILTY, CLYDE  
STREET ADDRESS 7095 ELM STREET  
CITY - ST - ZIP LONGMONT CO 80503

TITLE ST ☐ Delete  
NAME VANN, DONNA  
STREET ADDRESS 24 JOANNA DRIVE  
CITY - ST - ZIP SANTA ROSA BEACH FL 32459

TITLE D ☐ Delete  
NAME OLIVER, II, JOHN P  
STREET ADDRESS 324 SMOKERISE  
CITY - ST - ZIP DADEVILLE AL 36853

TITLE 1VPD ☐ Delete  
NAME OLIVER, MELISSA  
STREET ADDRESS 324 SMOKERISE  
CITY - ST - ZIP DADEVILLE AL 36853

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 000000629873  
CITY - ST - ZIP 02/19/07-80019-010 150.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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:

*Donna Vann* Donna Vann Secretary 2/8/07 850-231-5048  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #