

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000057247
1. Corporation Name

BUCKEYE LAND & DEVELOPMENT COMPANY OF FLORIDA, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

| | | | | | |
|--------------------------------|-----------------------|---------------------|------------------|--|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | |
| 21 | 8498 Ridgewood Avenue | 26 | 6712 Susan Drive | 07/25/1995 | |
| Suite, Apt. #, etc | | Suite, Apt. #, etc | | 4. FEI Number | |
| 22 Apt. 2205 | | 27 | | 59-3383727 | |
| City & State | | City & State | | Applied For | |
| 23 Cape Canaveral, FL | | 28 Castalia, Ohio | | Not Applicable | |
| Zip | | Zip | | 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |
| 24 32920 | | 29 44824 | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| Country | | Country | | 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| 25 USA | | 30 USA | | | |

9. Name and Address of Current Registered Agent

LOWTHER, CHARLES W.
250 International Parkway,
Suite 230
Heathrow, FL 32746

10. Name and Address of New Registered Agent

| | | |
|----|--|-----------------------|
| 81 | Name | LOWTHER, CHARLES W. |
| 82 | Street Address (P.O. Box Number is Not Acceptable) | 8498 Ridgewood Avenue |
| 83 | Apt. 2205 | |
| 84 | City | Cape Canaveral |
| 85 | Zip Code | FL 32920 |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Charles W. Lowther* 4/23/98
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-------------------------------------|---|--|
| TITLE | P/D <input type="checkbox"/> DELETE | 1.1 TITLE | S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Lowther, Charles W. | 1.2 NAME | Alice C. Valliere |
| STREET ADDRESS | 8498 Ridgewood Avenue, #2205 | 1.3 STREET ADDRESS | 100 Cherry Street |
| CITY-ST-ZIP | Cape Canaveral, FL 32920 | 1.4 CITY-ST-ZIP | Melbourne, FL 32901 |
| TITLE | <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 2.2 NAME | |
| STREET ADDRESS | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Charles W. Lowther* 4/23/98 407-799-4090
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/97)